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ABSTRACT

This conference was the first nationwide meeting focusing on issues concerning the employment of black Americans with disabilities. These issues are significant because one working-age black in seven has a disability. The conference goal was to explore ways to reduce or eliminate barriers to employment preparation services and to identify methods to facilitate employment opportunities. The following papers were presented at the conference: (1) "An Equal Employment Opportunity Commission Perspective" (C. Thomas); (2) "A Rehabilitation Services Administration Perspective" (J. Dart); (3) "A National Council on the Handicapped Perspective" (L. Frieden); (4) "A Health and Human Services Perspective" (J. K. Elder); (5) "Critical Factors in the Employment Successes of Black Americans with Disabilities" (M. E. Wilson, Jr.); (6) "Public/Private Partnerships To Facilitate Career Success for Minority Persons with Disabilities" (I. W. Hopkins); (7) "Session Summary" (E. Williams); (8) "Effective Approaches to the Education of Black Americans with Disabilities" (M. L. Walker); (9) "Education: Implications for the Black Family" (G. F. Wolinsky); (10) "Effective Approaches to the Education of Black Americans: A Response" (B. Hardaway); (11) "Session Summary" (J. Simmons); (12) "Rehabilitating Black Americans Who Are Disabled" (B. J. Atkins); (13) "Poverty, Race, and Disability" (H. L. Thornhill and D. A. HoSang); (14) "Session Summary" (M. G. Ross); (15) "Communication and Networking: Vital Links in the Rehabilitation and Employment of Black Americans with Disabilities" (E. H. Anderson); (16) "Vital Links in the Rehabilitation and Employment of Black Americans with Disabilities: A Response" (Y. W. Galiber); (17) "Session Summary" (J. King); (18) "Toward Economic Opportunity and Independence: A Goal for Minority Persons with Disabilities" (S. Walker); (19) "Effective Approaches to Education and Economic Independence for Black Americans with Disabilities: A Response" (C. V. Thorne); (20) "Session Summary" (A. M. Banner); (21) "Media Portrayal of Black Americans with Disabilities: Stepping Stones or Stumbling Blocks" (S. Kapur and R.

H. Ruffner); and (22) "Session Summary" (R. H. Ruffner). Photographs of presenters taken at the conference are included. (SLD)

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Proceedings of the National Conference

EMPLOYMENT SUCCESSES, PROBLEMS, & NEEDS
OF BLACK AMERICANS WITH DISABILITIES

ED339756

BUILDING BRIDGES TO INDEPENDENCE

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Proceedings of the National Conference

BUILDING BRIDGES TO INDEPENDENCE

EMPLOYMENT SUCCESSES, PROBLEMS, & NEEDS OF BLACK AMERICANS WITH DISABILITIES

Edited by

Sylvia Walker
Jesse W. Fowler
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Co-sponsored by
PRESIDENT'S COMMITTEE ON EMPLOYMENT OF PEOPLE WITH DISABILITIES
AND
THE CENTER FOR THE STUDY OF HANDICAPPED CHILDREN AND YOUTH,
SCHOOL OF EDUCATION, HOWARD UNIVERSITY

1988

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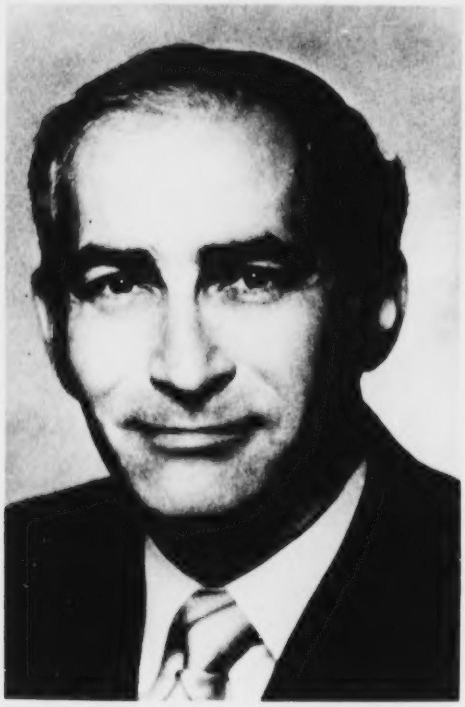

PREFACE

This conference was the first nationwide meeting focusing on issues concerning the employment of Black Americans with disabilities. The need for this Conference was made clear by the statistical report drawn from the 1980 Census Bureau Data. These data point out that one working age Black adult in every seven has a disability. Of 16,157,000 Black adults aged 16-64 and not in institutions, 14.1% have disabilities. There are 2,280,000 Black adults with disabilities.

The challenge presented by these findings is how the private and public sectors can effect policies and programs which will bring more Black persons with disabilities into the workforce. Thus, the goal of the National Conference was to explore ways to reduce or eliminate existing barriers to employment preparation services, and identify methods to facilitate employment opportunities.

The Conference presentation thoroughly examined the needs of Black citizens with disabilities. These included: increased rehabilitation services, better education, more thorough training, success-modeling, and corporate cooperation; to name a few. The host of interacting elements that compound the problems of Black people with disabilities require maximum efforts to solve. A recurring perception is that society's institutions are not yet dealing effectively with issues raised at this National Conference.

We are greatly indebted to many outstanding people who assisted in the planning, development and implementation of the Conference; especially its fine faculty. There is no way to list the names of all who helped and contributed to the success of a truly shared effort. A great deal of credit goes to Dr. Sylvia Walker, Robert W. Nicholls and other members of Dr. Walker's staff at Howard University for the success of the Conference.

We are grateful to the many persons whose ideas and concepts we cite in the pages that follow. It is gratifying to see the growing concern for improving the quality of life for Black people with disabilities. Our hope for this publication is that it will motivate others, as it does us, to insure that Black Americans with disabilities enjoy the economic independence that results from gainful employment. Our society's future prosperity demands that this become a national priority.

Jay Rochlin
Executive Director
The President's Committee On
Employment Of People With Disabilities

ACKNOWLEDGEMENTS

The editors would like to extend their warmest and sincere appreciation to each of the contributors and to the many national and local rehabilitation, medical, educational, technological, and other service delivery agencies who have contributed to the success of the Conference and the publication of these proceedings.

We are grateful to those individuals who have worked very hard in the preparation of this publication. Special thanks are given to Ms. Marilyn D. Miles, Ms. Ruth Ellen Ross, Dr. William McDonald, Ms. Willie Williams, and Ms. Crystal Miller for editorial assistance. We are especially appreciative of the support which we have received from the School of Education at Howard University, the National Institute of Disability and Rehabilitation Research (of the U.S. Department of Education), the President's Committee on the Employment of People with Disabilities, Members of the Planning Committee, and the Corporate Sector including Digital Equipment Corp., AT&T, IBM, New Jersey Bell, and DuPont Corp.

Finally, the cooperation and collaboration rendered by administrators, staff, students, and faculty of various institutions and organizations facilitated the accomplishment of the project's goal, providing a stimulating and informative conference in an atmosphere of fellowship and the subsequent publication and dissemination of the conference proceedings.

This publication is dedicated
to the memory of
Wilmer Samuel Hunt, Jr.
of Washington, D.C.

SECTION I.

BUILDING BRIDGES TO THE FUTURE

PRESENT AND FUTURE IMPLICATIONS FOR REHABILITATION

CONFERENCE KEYNOTE SPEAKERS

CLARENCE THOMAS
CHAIRMAN
EQUAL EMPLOYMENT OPPORTUNITIES
COMMISSION

JUSTIN DART
FORMER COMMISSIONER
REHABILITATION SERVICES ADMINISTRATION

LEX FRIEDEN
FORMER EXECUTIVE DIRECTOR
NATIONAL COUNCIL ON THE HANDICAPPED

JEAN K. ELDER
FORMER ASSISTANT SECRETARY DESIGNATE
HUMAN DEVELOPMENT SERVICES

EMPLOYMENT SUCCESSES, PROBLEMS, AND NEEDS OF BLACK AMERICANS WITH DISABILITIES: AN EQUAL EMPLOYMENT OPPORTUNITY COMMISSION PERSPECTIVE

CLARENCE THOMAS

Chairman
Equal Employment Opportunity Commission

Abstract

This paper examines the successes, problems, and needs of Black persons with disabilities. It also presents an overview of the purpose and workings of the Equal Employment Opportunity Commission (EEOC). According to the author, EEOC is both an employer as well as an enforcement agent. The author regretably acknowledges the existence of discrimination against persons with disabilities, especially Black Americans who face double discrimination. However, the author cites the case of a successful Black American with a disability to illustrate the few persons with disabilities that made it despite the stumbling blocks existing. This paper further cites that an advisory committee has been established to solve the problems confronting the Commission: enforcing Section 501 of the Rehabilitation Act; adoption of California Governor's Committee's "Tilting at Windmills" program which aims at breaking the barriers of discrimination against individuals with disabilities. Furthermore, the author argues that Section 501 is being misused by individuals with minor disabilities; and emphasizes that EEOC is only concerned with individuals with major disabilities. Finally, the author recommends the inclusion of individuals with disabilities to be members of the Commission.

This subject matter has been of particular importance to me, one that I have spent a considerable amount of time on. The Equal Employment Opportunity Commission (EEOC) has from the very beginning made it a top priority, not only as an employer but also as an agency with enforcement responsibility. I see a number of members of our commission here who have spearheaded our initiatives with regard to the employment of persons with disabilities. First of all, I would like to thank you all, particularly the President's Committee. I would also like to thank Dr. Walker, Jay and Harold for the tremendous amount of work they have undertaken to hold this conference, which is very timely and very very important.

Thirteen and a half years ago, as a young and (as I often tell my son) an athletic attorney, I journeyed to Jefferson City, Missouri. One of the most impressive and significant people I met there was a White lawyer who took me under his wing and helped me learn my major area of responsibility; taxation. Without him I would not have been able to represent the Department of Revenue and the State Tax Commission. He was simply an outstanding and tremendous lawyer. We spent an enormous amount of time and countless hours together. We became friends and debated everything from football to tax laws.

My friend Richard contracted polio at the age of 15; and, as a result, was a quadriplegic. He was, needless to say, confined to a wheelchair. There are some people who come along in our lives who expand our vision, who increase our outlook and in so many ways take us beyond where we would have gone without them. Richard was one such person for me. Richard's parents were told, after he contracted polio, to take him home and read him poetry. They were also told that he was not supposed to live into his adulthood. They ignored this advice, thank God. They took their son home and continued his education. He went on to graduate from the University of Missouri Law School with honors and pursued a distinguished career as a lawyer.

I would be lying to this group if I told you that I instantly reacted in the proper way to Richard. I was very uncomfortable. It is so very easy in this world to walk around full of platitudes and idealism when you're not confronted on a day-to-day basis with reality. Richard was there, he was reality. He was in a wheelchair, his arms suspended, he had to be fed, he had to be accompanied to the bathroom, but he was my friend. We experienced unnecessary steps and curbs, where there should have been curb cuts, narrow doorways that served no useful purpose but we experienced them together. I have grown use to being stared at, being from Savannah, because I'm Black, but now for the first time in my life we were stared at because he was in a wheelchair and his arms were suspended. I was used to being excluded from places because of the color of my skin, but not because of the necessity to help a friend in a wheelchair to ascend a flight of stairs. In all the time we spent together, Richard never once said he wanted anything special. Rarely, did he complain about anything, but we both knew that so much could and should be done so that he could have a fighting chance.

I am Black, and I grew up under segregation. I have very, very vivid memories of being treated badly just because of the color of my skin; and, today at EEOC, we continue to see the distressing problems of racial discrimination destroying people's lives and their livelihood. Racial discrimination is alive and well. I for one was never deluded into thinking that it had gone any place and am not surprised by many of the events that are taking place today. The many negative reactions to Richard, who was outstanding and well educated, were just plain wrong. Discrimination and policies based on race are also just plain wrong. But what if you are Black with a disability? What if you can overcome the disability, only to be stopped because of your race? What if you can avoid racism, but lose out because of handicap discrimination? You know better than I that your task is doubly difficult and may seem almost impossible. But this conference is boldly positive and forward looking. In looking at the purpose and objectives as well as the workshops, I see a group saying: "We have a unique problem, now let's develop a plan of action and get on with solving it." I see a "can do" attitude.

I have been Chairman of the Equal Employment Opportunity Commission for almost five years. In that time I've heard a lot of words of compassion about virtually every problem in society. I've heard a lot of talk of sympathy, but talk is cheap. Work and commitment, not words, get things done. I'm not going to give you a litany of the things that we have done to provide individuals with disabilities with an opportunity, but words have very little to do with our accomplishments.

I established an advisory committee with the mandate to solve our problems and solve them quickly. The role of this advisory committee has been indispensable in making progress as an employer and as an agency; and believe me, we have made a lot of progress. The progress started with work and commitment, not words. As you all know EEOC has the power to enforce the fair employment laws; and, of particular importance to this audience, Section 501 of the Rehabilitation Act. Section 501 was created to stop employment discrimination in the Federal Government against persons with disabilities. I suspect that eventually the mandate of Section 501 will be extended to the private sector. The law requires that Federal employees or employers provide adequate hiring, placement and advancement opportunities to persons with disabilities. At EEOC we are committed to ensuring that reasonable accommodation requirements are made. I tell my managers: "If you find a qualified applicant for a job who happens to have a disability, hire them." When it comes to providing money or equipment to accommodate them, that's my job and it's not a problem. I don't care what anyone says, that is a poor excuse. There is nothing wrong with ensuring a place in this country's work force for people with disabilities. What is wrong is society's attitude toward this goal. That attitude is a product of ignorance, myths, stereotypes and fears; and as long as these attitudes prevail employees with disabilities will never truly be a part of the work force. They will neither advance, nor will they be given any great responsibility. We recognized that this attitudinal problem exists within the federal government, and have taken steps to eliminate it. At EEOC itself, we have adopted a program developed by the California Governor's Committee for Employment of the Handicapped called, "Tilting at Windmills." The goal of this program is simple, it is to increase the employment of people with disabilities. The program reduces attitudinal barriers that prevent persons with disabilities from obtaining meaningful employment or advancing beyond entry level positions, by eliminating fear, biases, myths and stereotypes.

"Windmills" teaches managers and executives that accommodations are not complex or necessarily expensive. It breaks down barriers between personal supervision, EEO and management. The Commission has required that all of its top executives and mid-management personnel take this course, so that they may discover their own biases and conquer them. We have trained field employees in this program and sent them back to their district offices to further train Commission employees and exorcise this attitudinal barrier from our organization so that we may provide the best consistent services for the government's employees with impairments throughout the country.

Another major threat to the goal of equal opportunity for persons with disabilities is the trivialization of equal employment laws that now exists. I'm appalled to see that many of the cases that come to the Commission alleging discrimination on the basis of impairment are filled by individuals with minor or temporary disabilities. These individuals are abusing Section 501 and may ultimately, through their frivolous claims, undermine the laws for the individuals for whom Section 501 was intended to benefit. I do not believe Section 501 was created to protect individuals suffering from lefthandedness, flat feet, or sprained wrists. Section 501 was designed to protect individuals with substantial impairments. Impairments such as blindness, deafness and impairments in mobility. If these complaints and suits are not curtailed or discouraged, the capability of Section 501 to protect the rights of people with disabilities will be greatly reduced. Believe me, with the decisions we have made recently, it will be reduced to the point of non-existence if we don't stop it. Some people are using reasonable accommodations to request reassignments to light duty stations for a sprained joint, to request a change in job description and responsibilities to accommodate their minor impairment. It is these individuals who are engendering resentment and negative feelings among management to hiring, accommodating and promoting individuals with disabilities. Who pays the price? Ironically, it is the very group whom these laws were originally designed to protect, those individuals with substantial disabilities.

As Chairman of the Equal Employment Opportunity Commission, I have worked towards invigorating Section 501 so that it will actually protect those employees with substantial impairments, not those individuals with minor or temporary problems. Stopping the trivialization of the equal employment laws for persons with impairments is a major goal of my tenure here at EEOC. You will see a lot of significant action by the Commission on this issue in the next year or so, as we move towards ensuring equal opportunity for persons with disabilities in the federal work force.

To this end, I urge the President to nominate a person with a disability to be a member of the Equal Employment Opportunity Commission. As many of you know, our leading candidate for our vacant position is Evan Kemp*, who has a mobility impairment. He's an honors graduate from the University of Virginia Law School and has been active in the area of disability rights for years. Hopefully, he will be the first person with a disability to sit on the Commission, and will bring to the Commission the necessary focus and emphasis needed to fulfill the Commission's responsibilities.

Your confidence represents a commitment to building a society comprised of more responsible men and women. I wish you success in helping the rest of society achieve that goal, as you achieve it for yourselves. We need your help. Good luck with your conference and may God bless you.

* Mr. Kemp was appointed June, 1987.

EMPLOYMENT SUCCESSES, PROBLEMS, AND NEEDS OF BLACK AMERICANS WITH DISABILITIES: A REHABILITATION SERVICES ADMINISTRATION PERSPECTIVE

JUSTIN DART

Former Commissioner
Rehabilitation Services Administration

Abstract

This paper overviews the role of human rights in facilitating the productive social process (employment) of people with disabilities. Cognizant of the above fact, this paper argues that until the general public and decision makers understand that individuals with disabilities have equal responsibilities, there will be the problem of prejudice, paternalism, pity and unemployment of individuals with disabilities. Finally, this paper argues that justification for employment equality, independence and equal opportunities of individuals with disabilities are not charity; not economic, political or emotional expediency, but rather an issue of social justice.

It is an honor to be introduced by Harold Russell, who has been and is a great pioneer at the frontier of Human Development. It is also a privilege for me to be able to be here today with great contributors to the cause of Human Rights and productive independence for people with disabilities like: Tom Bellamy, Vernon Hawkins, Sylvia Walker, Jay Rochlin, Pat Morrissey, Evan Kemp, Eunice Fiorito, Ethel Briggs, Judy Gilliom and many others.

I speak to you today not officially as Commissioner of the Rehabilitation Services Administration, but as a fellow advocate for human rights, as a campaigner for the integration of a segregated Southern University in the early 50's, and as a life member of the Urban League and the National Association for the Advancement of Colored People.

Thanks to many of you here today - and to thousands of our colleague advocates, there has been a miracle of progress for Black people and for people with disabilities in this nation during the last few decades. However, I don't have to tell any of you that we still have a long hard road to the "promised land" where all citizens have an equal opportunity to participate in the "American dream." Millions of potentially productive, independent citizens with disabilities of all races are still excluded from the mainstream of cultural process, including productive employment, and are condemned to an existence of unjust, unwanted, degrading dependency.

The purpose of this conference is to address the employment problems of Black persons with disabilities. I am not going to speak with you about specific employment strategies. Nor am I going to speak with you about the special employment problems of Black people with disabilities, except to observe that they do obviously carry additional burdens such as residual race prejudice and a higher incidence of poverty and unemployment. Those subjects are important, but I imagine they have been well-covered by others.

There are certain actions and understanding which I believe must occur before our excellent traditional and developing employment programs like vocational rehabilitation, independent living and supported employment can be optimally effective.

I am convinced that full employment will be achieved only on a strong foundation of education, human rights and responsibilities implemented, a continuum of productivity and independence-oriented public and private services, decisive action to prevent disabilities, creative research, entirely new types of communities which are planned to be truly accessible to all citizens, and most importantly, courageous advocacy and action by the government, by people with disabilities, their families, service providers, and by all who love the

"American Dream."

I will speak to you today about one of these issues: Human rights and human responsibilities. The balanced implementation of human rights and responsibilities is an indispensable ingredient of the productive social process. We hold these truths to be self-evident, that the existence and dignity of each human being is equally sacred and inviolable, that disability is a normal characteristic of the human process, and that people with disabilities have the same rights and the same responsibilities as other people.

We must use all educational, communications and legal systems to incorporate into the cultural consciousness the concept that people with disabilities, like all human beings, have the fundamental right and the fundamental obligation to fulfill their potential to be as independent, productive and self-sufficient as possible, to participate equitably in the mainstream of society, and to preserve and maximize the quality of life for themselves and for all people. Until public and private decision makers and all citizens fully understand and internalize these principles, we will continue to be faced with the impossible task of pleading, begging, arguing and negotiating each job, each grievance, each opportunity, and each request for essential services on an individual basis. We will continue to receive whatever result seems expedient to a particular individual or group at a given time and place.

Until this nation understands that people with disabilities have equal rights and equal responsibilities, we will continue to carry the intolerable burdens of prejudice, paternalism and pity; and full employment will be impossible. I believe that this understanding of our rights will require not only our dedicated advocacy, the total involvement of families, and all educational and communications media, but also strong leadership by our government; including comprehensive equal opportunity legislation.

In summary, I would like to restate that the justification for the productive independence and equality of people with disabilities is not charity, not economic, political nor emotional expediency; rather, it is the inalienable right and responsibility of all human beings to fulfill their productive and life quality potential. It is also the fundamental obligation of human society to do whatever it takes to enable its members to achieve that ultimate fulfillment.

"We, the people of the United States, in order to establish justice..." The issue here is justice. I speak of that most profound justice which is rooted not simply in law and regulation, but in the essence of the existence and quality of the individual and collective human being.

President Reagan has written that "disabled people should have access to the best quality of life that our free nation has to offer." My distinguished colleague, advocate, Madeleine Will, has declared that, "Our fellow citizens who are disabled want the same kind of opportunities the rest of us have, and they ought to have the same kind of opportunities the rest of us have because they deserve it. Not because it's prudent, although it happens to be prudent, but because they deserve it and because it is just" Dr. Martin Luther King, Jr. stated that, "Injustice anywhere is a threat to justice everywhere."

It is an injustice to deny any human being the effective right to be as productive as possible in the mainstream of society. The true greatness of America lies in its real progress toward keeping the promise of "liberty and justice for all." Every generation of Americans from Washington and Jefferson to Abraham Lincoln, Martin Luther King, Jr., and Mary Switzer had a sacred responsibility to keep and to expand that promise of justice.

We must rise above the limitations of politics, personality and turf, and unite to establish the basic human rights of people with disabilities in the consciousness, in the law, and in the daily life of this nation, to keep the great American promise of justice for Black people with disabilities and for all people with disabilities. I will do anything within the limits of honor to cooperate with each one of you to fulfill this sacred responsibility.

I earnestly solicit your guidance and help as I attempt to execute my statutory and moral responsibilities as Commissioner of the Rehabilitation Services Administration. Alone, I can accomplish little. Together, we can make a difference in the ongoing struggle for a just and productive society.

Thank you.

EMPLOYMENT SUCCESSES, PROBLEMS, AND NEEDS OF BLACK AMERICANS WITH DISABILITIES: A NATIONAL COUNCIL ON THE HANDICAPPED PERSPECTIVE

LEX FRIEDEN

Former Executive Director
National Council On The Handicapped

Abstract

This paper focuses on the National Council of Handicapped's report titled "Toward Independence." Dr. Frieden observes that the report contains some startling discoveries, such as the fact that a) of the 12.9 million disabled Americans, one third are either unemployed are do not receive any public assistance from the federal government's spendings of $60 billion dollars and b) a disproportionate number of persons with disabilities are homeless. The paper describes the type of discrimination which many persons with disabilities face from a personal perspective. Discussion includes a summary of some of the disincentives which act as deterrents to employment for many persons with disabilities. Finally, the paper challenges persons with disabilities to work for the rights and opportunities to which they are entitled as American citizens.

Jay, I'd like to thank you for that very fine introduction and to say how pleased I am to have an opportunity to be here with you this afternoon. I would also like to say that it is an honor to share this table with a number of people for whom I have the greatest respect. I have known Elizabeth Anderson for several years, and she has lead me through the NRA (National Rehabilitation Association) ropes by introducing me to people like Jack Duncan for whom I have great regard for. Working with Sylvia Walker in the area in which we are focusing today provides the opportunity for new directions. My good friend and colleague, Jay Rochlin, has worked very closely with the Council in developing both the Council as an independent agency and restructuring the President's Committee

On Employment Of The Handicapped. I would also like to say how pleased I am to be here today with Ethel Briggs, the Adult Services Specialist for the National Council On The Handicapped, a person for whom I have the highest regard. I have worked with her for the past ten years on the certification of rehabilitation counselors and other projects of that nature.

In regard to the National Council On The Handicapped, I would like to say that the Council has great opportunities as well as responsibilities. As many of you know, the Council was originally established in 1978 as a result of an amendment to the Rehabilitation Act of 1973. Initially, it was located in the Department of Education as an advisory body with the principle responsibility of providing advice to the Director of the National Institute of Handicapped Research (NIHR) on policies related to research. I am pleased to say that the policies that were established during that period are still in effect today. I must say, from time to time, the present Council wonders, as I am sure the members of past Councils who worked diligently to put together these policies wondered, to what degree the present Institute is really intended for those policies.

In 1984, through the Rehabilitation Amendment, the Council was made an independent federal agency, given new authority and the opportunity to report recommendations related to disability policies directly to the President and Congress. The Council was also given the responsibility to produce, by February 1986, a comprehensive report listing a) the status of people with disabilities in America and b) make recommendations regarding incentives and disincentives (as to whether they should be either promoted or eliminated from disability policies). The Council in 1984 and 1985 then faced the challenges of fully setting up an independent federal agency and at the same time developing a substantial report. The Council consisted of 15 members who were appointed by the President and confirmed by the Senate. The present Chairperson of the Council is Sandra Parrino. Should any of you be interested in a seat on the Council, we presently have two vacancies. One was the seat of Commissioner Dart, who I understand was here earlier today. So if you send your applications to the President, he will be interested in reviewing them at the present time.

In 1985, its objective was to provide the President and Congress with a series of creditable, meaningful and do-able recommendations which would result in removing disincentives and barriers for people with disabilities (which they face when they try to be independent, productive and contributing members of society). The Council's recommendations were aimed at facilitating independent living for people with disabilities, and enhancing their opportunity to be active participants within their own families and communities.

The Council must, in addition to the responsibility of establishing general policies for *NIHR, advise the Commissioner of Rehabilitative Services on disability policies. It also has the responsibility of reviewing all policies on a continual basis. The Council saw the preparation of the report, "Toward Independence," as its major duty and function. I am pleased to inform you that the report was completed and presented to Congress during 1986. Those of you who are interested in obtaining this report (of which we are proud) may do so by writing to: The National Council On The Handicapped, 800 Independence Ave., S.W., Suite 814, Washington, DC 20591.

There are some startling findings in the report. Of 12.9 million disabled Americans of working age, approximately one third are currently employed, one third receive public assistance, and one third are unemployed and do not receive public assistance. These statistics should be considered in light of the recent

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*Presently the National Institute On Disability Rehabilitation Research

Harris Poll conducted in collaboration with the Council, which indicates that more than half of the people with disabilities who are unemployed would like to work. People with disabilities are frequently prevented from working by a complicated array of structural, attitudinal and environmental barriers which we have been discussing for the past two days. Now the interesting observation one may draw from these statistics is the fact that one third are unemployed and do not receive public assistance. We assume from this that these people are either independently wealthy, and that is unlikely to be the case, or they have very few resources aside from those available within their family structure. We are beginning to discover that many of these people are in the category that we now refer to as homeless. The Council is presently conducting a survey of homeless people to determine what proportion of the homeless population consists of persons with disabilities. We are beginning to conclude that a very large proportion of the population of persons with disabilities, approximately one third, are unemployed and not receiving public assistance. This is interesting when one looks at the fact that the federal government spends 60 billion dollars annually on disability-related service programs. What is even more interesting is that only two billion dollars of that amount is being spent on what we would consider productivity and independence-oriented rehabilitation and education programs. Most of the money which the federal government now spends on disability is spent on possibly needless institutionalization. The Council feels it is their responsibility to gather the data necessary to convince the Congress and the Administration that we need to focus more on independence-oriented programs like vocational rehabilitation and special education. Among the 45 specific legislative recommendations that are contained in the report, "Toward Independence," are several which pertain to the Council's overriding theme of "equal opportunity." Now, we know the United States Constitution guarantees equal opportunity for all Americans, but many of us who are Americans with disabilities continue to encounter blatant discrimination.

At a recent Council meeting held in Miami, Florida, I was amazed by the severity of issues presented by people who had come to testify before the Council about issues that concern them as persons with disabilities. Their testimonies reminded me of my own experience when I broke my neck in 1967. As a result of receiving medical rehabilitation in 1967 and the assistance of the Oklahoma State Rehabilitation Council in 1968, I optimistically applied for admission to Oral Roberts University. The university advertised what appeared to be a number of fantastic services available to students. Since students were required to take all the courses, I wondered how many days of class I would be able to attend. However, this university provided facilities where I could watch video tapes of the classes I would miss on days when I might be ill. So I applied.

Several weeks after making application, I received a call from the Dean of Admissions notifying me that I was not accepted. Immediately I called the university and told them there must be a mistake. I indicated that I had met all the requirements for admission: I sent the completed application with my transcripts, (which indicated that I was the Valedictorian of my high school graduating class with a 4.0 grade point average), my SAT, ACT and other tests results with scores in the 90-95 percentile, and a letter of recommendation from my minister. The man assured me he had the correct file. He acknowledged that I "was a good student and had been a President's Scholar at a state university" when I broke my neck, but unfortunately "I did not fit the requirement for admission to the university." When I asked, "what requirement?" He said that I had reported that I was in a wheelchair and disabled. I told him that was true.

He then told me that was the basis on which I had been denied admission to the university.

This was pretty startling to me. I had heard a lot about discrimination in school, discrimination against minorities and discrimination against people with disabilities, but I had never really encountered what I considered a face-to-face real discrimination. I had never been told before that I couldn't do something because of the color of my skin or my other characteristics. This was a real lesson to what it feels like to have somebody tell you that on the basis of characteristics, you can't do something. After giving it much thought, I felt there should be a law against that type of discrimination.

At the same time, (the late 60's) people like Jack Duncan and Pat Morrissey and others were working to help create such a law. Section 504 of the Rehabilitation Act, what many of us regarded as our "Civil Rights" law at the time, was the result of their efforts. At that time, we expected discrimination against people with disabilities to end. That was only hope and fantasy, because last week in Miami a young man came to me and said that he had tried to get a job and, even though he was qualified, he was told because he was in a wheelchair and disabled he could not have the job. Thus, discrimination against persons with disabilities continues. It has to end now. It may require additional legislation. The Council is working on some recommendations in that area.

There are certainly people who are concerned about the issue of discrimination. It may require enforcement. Since it is not occurring now, the Council has begun to look at enforcement that is being provided by the Justice Department and other agencies of the federal government with respect to those provisions that are on the books. It may require making the public aware of the fact that at this current time (1987), discrimination against persons with disabilities still exists.

It is incredible that, twenty years after I broke my neck, these problems are still not solved. People with disabilities continue to be demoralized. We wondered why people with disabilities didn't seek employment. Well it is pretty obvious. People do not want to be told they can't do something based on characteristics they can do nothing about.

There are other reasons why individuals with disabilities are unemployed. We have vast disincentives built into our system. Who would want to work when they can earn more money by staying at home? What are the trade-offs between being employed and paying for all of the expenses associated with one's disability, such as special transportation and special services? By the time you subtract these expenses from your salary, you begin to wonder if the Social Security Disability Insurance is not a viable solution to persons with disabilities with its built-in advantage of Medicare. You look at people who are eligible for Social Security Insurance, Medicaid and other kinds of services and wonder if they are making the right decision in seeking employment.

Sometimes we try to project the value system of the merit of work that really does not make sense from a logical perspective for persons with disabilities who are unemployed, particularly those with severe disabilities. It is our responsibility to design a system sensitive to persons with disabilities who are trying to be independent. All of us want to be independent. Very often, the question is asked, "what are the needs of people with disabilities? What do disabled people want?" Data taken from the Harris Poll conducted last year indicates that people with disabilities all over the country want the same thing everybody else wants. We want to make decisions for ourselves. We would like to be self-sufficient, have a family, a nice place to live, our own transportation, and be responsible for our own lives. Yet, to achieve these goals, persons with disabilities in this country today have to take risks that are not equal to the risks that non-disabled people have to take to achieve the same goals. We have to design a system so people with disabilities don't have to take those risks. We are beginning to make progress.

In 1986 a number of people working together, lead by the National Rehabilitation Association, were able to work with Congress to pass legislation that would help to eliminate some of the risks that people with Social Security Insurance face as they try to go to work. That is very, very important. That is landmark legislation. Now, we as service providers and consumers, have the responsibility to go out and educate people with disabilities so that they realize they won't have to take the risks they have in the past when seeking employment.

The Council has a number of priorities, most important among these is to insure that people with disabilities have equal opportunity by whatever means necessary. It is the responsibility of groups who have the interest of persons with disabilities and persons with disabilities to fight for the rights we do not have now. We have to advocate to receive the benefits we are entitled to and do not receive. The Council is concerned about other related issues such as; transportation, care of individuals with disabilities, access to health care, education, and so on. I would encourage all of you to support the Council in its efforts to make recommendations to the Congress to recognize that no one body, which includes 15 members and 8 staff persons, no matter how dedicated they are, can do this by themselves. We have to be part of a larger body. The larger body has to involve all of us working together to share common beliefs about what the problems and what the solutions to those problems are. None of us can work in closets and expect to achieve anything. We have to work together. The Council is anxious to have input from each of you, from the groups that you represent in developing recommendations that may be carried forward to Congress and to the Administration. We hope you do not wait on the Council to begin to do that. We all have to move together. We all have to insure that our representatives (the people who are responsible for making decisions that affect the lives of persons with disabilities) realize that they have an obligation to us. Like people without disabilities, there is more to life than work. It should be a full and enriched life that involves recreation and use of free time. Persons with disabilities should not be confined to institutions as they have in the past. We should have the opportunity to make decisions that affect our own lives. Unless we, and the people who are working with us and for us, realize that we have not gained equality on each one of these grounds and make the public aware, then they are going to sit and wonder where we are. We must go out and seek the opportunity we deserve. Thank you very much and I really appreciate the opportunity to be here.

EMPLOYMENT SUCCESSES, PROBLEMS, AND NEEDS OF BLACK AMERICANS WITH DISABILITIES: A HEALTH AND HUMAN SERVICES PERSPECTIVE

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Abstract

Cognizant of the fact that Blacks with disabilities are doubly discriminated against (residual race prejudice and higher incidence of poverty and unemployment). The author outlines the strategies which will facilitate full employment for individuals with disabilities. Specifically, however, the author concentrates on the issue of human rights and human responsibilities and she suggests that both are an indispensible ingredient of productive services. This paper strongly argues that providing equal opportunities to persons with disabilities is a human rights issue. The paper further argues that emphasis must be laid on self-sufficiency and self-reliance of individuals with disabilities.

This conference focuses on an issue which has not received enough attention from program administrators and policy makers in the federal government. I look forward to hearing the recommendations that result from your meetings.

According to a 1986 report by the National Council on the Handicapped, America's annual federal expenditure on disability benefits and programs exceeds $60 billion. Various estimates place the number of Americans with disabilities between 20 million and 50 million, with 35 or 36 million being the most commonly quoted figure. Among this group, are Black Americans with disabilities who must also contend with social and economic disadvantages to an extent which the Howard University project is now exploring.

There are 45 separate federal programs serving people with disabilities--with the top ten programs (in terms of expenditures) devoted to public assistance, rather than rehabilitation, education, training, or remediation.

As a recent report by our department's Inspector General pointed out, many feel that current federal programs have been providing too great an incentive to states and communities to rely on public assistance benefits instead of potentially less expensive alternatives; that is, maintaining dependency instead of encouraging productivity, self-sufficiency, and integration into the mainstream community.

At the Office of Human Development Services one of our major responses to this issue could be summarized in one word: WORK! Work is a primary objective of most people leaving the school system, whether they have a disability or not. Other aspects of people's lives, such as where they live or where they spend their money, are heavily influenced by the amount and type of work they do and the pay they receive. Work should be no less important for persons with disabilities than for anyone else.

Second, there is increasing evidence that many persons with severe disabilities are capable of working in integrated settings--that is, side by side with people who do not have disabilities--even though they previously were considered incapable of work or capable of working only in a work activity center or other sheltered setting. Until very recently, work in integrated settings was not considered a feasible goal for many persons with severe developmental disabilities after they leave school. They were usually placed either in adult day care or were not provided services at all.

Educational and other services provided to students with developmental disabilities are critical to vocational success as adults. Preparing students to have independent living skills and to be employable in the marketplace should be the major goals of the educational system. Without careful planning and preparation for post-school placement, however, these goals are seldom achieved by young people with disabilities.

Employers look for the bottom line, and so do we at the administration on developmental disabilities. In two years, through our successful employment initiative, we have helped to place more than 87,000 people with developmental disabilities, into paid jobs. Now, they are earning about $400 million in taxable wages every year, and the cost of their benefits and services has been reduced by another $400 million a year.

It is important to recognize that the organization and delivery of services for persons with mental retardation and other developmental disabilities has been--and continues to be--a state and not a federal government responsibility. The assumption is made that the interests of persons with disabilities are better served through state-run programs. Yet, at the same time, a symbolic relationship exists between the executive and legislative branches of the federal government. Through this relationship we are striving to achieve a national policy on disability, which will set out the rationale for, and parameters of, America's investment in its citizens with disabilities. That policy must include the overall guidance by which services and programs will be created, expanded, redirected, improved or abolished.

Ten years ago, the Education for All Handicapped Children Act began a national experiment which demonstrated conclusively that virtually every child with a disability could benefit from education in the public school system. Previously, they had been hidden away in special schools and special programs that were little more than warehouses for human beings. Resisted at first by many parents as well as professionals, this experiment has proven to be a resounding success, not only in its educational aspects, but in its socializing aspects as well. Children with disabilities can now be helped in transition from the world of school to the world of work, with a much greater chance of overcoming the enormous social and economic barriers of the past.

I still remember clearly a witness at a Senate subcommittee hearing on disability--it happened to be a young Black man--who said, "My body makes me disabled...but society makes me handicapped." That applies also to any person with a physical, mental, ethnic, or social disability. Part of our task is to deal with the social and economic handicaps imposed--sometimes unthinkingly--on our fellow citizens. It is evident that future directions in service design and delivery will be driven by prevailing social values. The social consciousness of the late 1970's and early 1980's is reflected in the revolutionary advancements made in the field of mental retardation.

For those of us in the disability fields, this means emphasis on self-sufficiency and self-reliance. For example, the case management systems established in the 1970's are now directing greater attention to teaching persons with developmental disabilities--and their families--how to be their own case managers. The aim is to bolster each individual's personal support systems (both formal and informal) so that he or she will have access to the opportunities which will make life worthwhile.

We must bring the marketing, planning, and financing strategies that work so well for the private sector into the public sector as well. We need to market the developmentally disabled population as a viable, capable group with the capacity to contribute to society. We must further elaborate those economic arguments which make it clear that employment of persons with disabilities is a desirable outcome. Our service system must incorporate a developmental approach, in which each segment is an integral building block; and we must continue to involve the private sector in our quest to creatively finance the support services needed to maximize the independence and full community integration of persons with developmental disabilities.

The basic need for activity, freedom, and competence is what we are all about--giving people opportunities rather than help in a narrower sense. Increasingly, professionals are functioning less as those who dole out services, money, and wisdom; and more as enablers to help people to help themselves as we all come to recognize the interdependence of everyone, this trend must continue to grow. Such a dramatic shift, enabling self-help, will revolutionize human services in America and make a powerful contribution to developing an attitude of helpfulness and caring within our society.

1983 through 1992 is the international decade of persons with disabilities. In the United States, we have set the following goals for this decade:

1. Expand educational opportunity;
2. Improve access to housing, buildings, and transportation;
3. Expand employment opportunity;
4. Expand participation in recreational, social, religious, and cultural activities;
5. Expand and strengthen rehabilitation programs and facilities;
6. Purposeful application of biomedical research aimed at conquering major disabling conditions;
7. Reduce the incidence of disability by expanding accident and disease prevention;
8. Increase application of technology to minimize the effects of disability; and
9. Expand international exchange of information and experience to benefit all persons with disabilities.

Our overriding aim is to make all Americans aware that our nation will truly benefit if we achieve the common goal of enhancing the quality of life for people with disabilities.

As Assistant Secretary for Human Development Services, I hope to explore new service strategies, and to develop new ways of thought and action. The 98th and 99th Congresses--from 1983 through 1986--gave great impetus to the achievement of this goal. In the 98th Congress, the Developmental Disabilities Act was broadened to include employment related activities for people with developmental disabilities--people who in the past have been considered incapable of productive work. The Rehabilitation Act was strengthened in its services to help people with disabilities to live independently in the community, rather than in institutions.

The 99th Congress greatly expanded the Rehabilitation Act by increasing programs for supported work services to help people with disabilities to work in integrated settings, but still receive counseling and other social services to help in their adjustment to the world of work. The appropriation was increased more than 30% to over $1.3 billion to carry out these new Congressional mandates. The Social Security Act was amended to permit people with disabilities to retain their health insurance and social services benefits while working in paid jobs. Previously, they were at risk of losing these benefits if they earned more than a few hundred dollars a month, with the result that many, quite understandably, refused opportunities to enter the work force. The 99th Congress also strengthened the Education for all Handicapped Children Act, providing grants to states for pre-school services to children ages 0-5. This will make it possible for children with handicaps to receive the services, guidance, and interventions which will make all the difference in the world in their later adjustment and future.

It is encouraging to witness the progress that is being made and the momentum that is building. For example, consider Kathy, who has worked full-time for the past four and a half years in a busy cafeteria. Kathy was born with Downs Syndrome, but this hasn't limited her ability to be a productive member of society. Her employer says that when she's on vacation customers always want to know when she'll be back. The good news is that stories like Kathy's are finally becoming more the rule than the exception. To other people with Downs Syndrome throughout the country, achieving a higher rung on their developmental ladder, whatever that might be, is a major accomplishment.

It is exceedingly difficult for a culture to discard old beliefs; nevertheless, our society has made great strides. It is now generally accepted that:

The world is round and not flat.
The earth is not the center of the universe.
Electricity is not a liquid.
There are no slaves, only citizens.

Let us add to those outmoded myths one more: People with disabilities can't have a future of productivity, independence and integration into the community. That is a stereotype that we are proving every day to be false, and our nation is the better for it.

I commend Howard University's Center for the Study of Handicapped Children and Youth, and the President's Committee on Employment of the Handicapped, for making this meeting possible. I believe the information presented here will be highly beneficial to our stewardship of federal programs as they relate to the special problems of Black Americans with disabilities.

SECTION II.

BUILDING BRIDGES TO EMPLOYMENT

CRITICAL FACTORS IN THE EMPLOYMENT SUCCESSES OF BLACK AMERICANS WITH DISABILITIES

SESSION A

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CRITICAL FACTORS IN THE EMPLOYMENT SUCCESS OF BLACK AMERICANS WITH DISABILITIES

MILTON E. WILSON, JR., Ph. D.

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Abstract

The purpose of this study is to examine the factors which are critical in the Employment Success of Black Americans with disabilities. Studies have shown that Black Americans with disabilities are less likely to be employed in managerial and technical/professional jobs. On the average, when compared with other individuals with disabilities, Black Americans with disabilities have a low participation in the labor force. This paper includes seven case studies of successful Black Americans with disabilities. Finally, the author points out the key factors which facilitate successful employment of Black Americans with disabilities. These factors include positive self concepts or confidence, realistic self-appraisal, preference for long time goals, availability of strong support, and demonstration of community service.

Introduction

There are many Black Americans between the working ages of 16 and 64 with physical, mental, and social disabilities. According to Bowe (1985):

> o One working-age Black adult in every seven (or 14.1%) has a disability.
>
> o Most (53.9%) Black adults with disabilities of working age are women.
>
> o The average Black adult with a disability is 42 years old, has less than a high school level of education, does not work, nor is actively seeking employment. Income from all sources was under $3,000 in 1980.
>
> o Almost half (47%) of all working-age Black adults with disabilities live with incomes below the poverty line. This is largely attributable to the fact that only one in every six (16.4%) works. The unemployment rate in March, 1982 among Blacks with disabilities of working age was 26.5%. (p.3)

Also, according to Bowe, of those Black Americans with disabilities participating in the labor force by working or seeking employment, "Almost three-quarters (73.5%) found jobs" (p. 15). The types of work performed by Blacks with disabilities like that of their nondisabled counterparts, is spread across the various occupational categories--professional/technical, managers/administrators, sales workers, clerical and kindred workers, craft and kindred workers, operatives, laborers (except farm), service workers, and farm workers (pp. 18, 21).

Nonetheless, "As compared with other individuals with disabilities, Black adults with work disabilities are much less likely to be employed as professional/technical or managerial/administrative workers and much more likely to work in labor jobs" (p. 18).

Despite the low participation of Blacks with disabilities in the labor force and their low proportions in the various occupational categories, the factors related to their employment success need to be understood, appreciated, and promoted. It is important for us to identify those factors which singly and in combination enable Black individuals with disabilities to overcome their handicaps to achieving employment success. With such knowledge, hopefully, we can improve the education, guidance, relationships, service delivery initiatives, and other efforts to assist them in their quest for employment success.

Because little has been published in a single initiative about the employment success of individual Blacks with disabilities, because nothing to my knowledge has dealt with this topic in a systematic way, and because of my interest in the successful adaptation of Black Americans to personal and environmental challenges and my very strong belief that success should be studied and duplicated, this study, as exploratory as it may be, represents a contribution to a literature that needs to be developed.

The question that has been guiding me in this and several other inquiries is: What factors are critical in the employment success of Black Americans with disabilities?

Some Definitions

Black Americans

For this study, the term Black Americans refers to those persons who identify themselves or are identified by others as being of African descent at least in part, and because of this are measured, in part, against the stereotypical norms--conscious and unconscious and subjective and objective--associated with Black Americans.

Although race, with its tradition of slavery, servitude, and deprivation of economic, educational, and other opportunities, has disadvantaged most if not all Black Americans, Black Americans as a group are not monolithic; and there exists great variability in the racial category with respect to every measurable variable. In addition, the differences within the Black American category are greater than the mean differences between racial categories.

Disability

The term disability refers to any limitation experienced by a person who has any deviation from the normal which results in defective function, structure, organization, or development of the whole, or of any faculties, senses, systems, or organs as compared with the activities of unimpaired individuals of similar age, sex, sub-culture, and culture.

Handicap, a related term, refers to the disadvantage imposed by impairment or disability upon a specific individual in his cultural pattern or psychosocial physical, vocational, and community activities. An impaired person is not necessarily disabled or handicapped by the impairment, but he may be either disabled or handicapped or both.

Race, in this case Blackness, may interact in the minds of persons with stereotypical norms associated with a disability. When this occurs, the Black American with a disability may be referred to as being "doubly handicapped," being a member of a "double minority," having a "double yoke," "double whammy," and so forth (Gilliam, 1981; Pape, Walker & Quinn, 1983). While the interaction of race and disability may be viewed as catastrophic, there is still the possibility that the disability may, indeed, push race into the background and exert influence apart from or more so than the racial factor.

Employment Success

For this study, employment success refers to an occupational activity, usually, but not necessarily, for pay. It refers to the record of getting, keeping, and developing in, occupational activities basically in terms of career paths and not just jobs.

Employment success is basically the achievement of occupational and career goals that one has established for oneself (Merchant, 1976), often with the assistance of others, but which also in the case of this study has received some public recognition, generally in some publication. This latter restriction means that the person is a public person and, hence, open for comment and/or further study.

Critical Factors

The term critical factor has several meanings. First, a critical factor is a characteristic, either internal to the person--like self-concept, educational achievement--or external to the person--like employment opportunity, laws and regulations governing employers--which is believed by authorities in the field of employment success to be necessary for securing, maintaining, and experiencing development and satisfaction in occupational activity. Second, a critical factor is a characteristic, which, if absent, severely limits a person in securing and maintaining an occupational activity. Evidence for the first would be judgments that the authorities make and then apply to persons considered to be successfully employed in order to ascertain the presence of these factors in their lives. Evidence for the second would be the statistical demonstration that the presence of the factor is related to employment, while its absence is related to unemployment. In this study, the first definition applies to the research initiatives.

Review of Literature

In searching the literature for an answer to the question, I reviewed literature in the following areas: the factors that employers say are important to employment success; the factors considered related to employment success by personnel specialists who assist persons in preparing for, entering, and staying on the job; studies and reports differentiating Black Americans enjoying employment success from those who do not; studies examining the issue of race as a factor in employment success; the themes in the popular literature regarding factors related to employment success among Black Americans with disabilities; and the critical factors related to educational success--a form of occupational success--of Black Americans, particularly in predominantly White institutions of higher education.

Employers (e.g., Grensing, 1986; Half, 1986; Sisson, Arthur, Fierro & Gadza, 1978) and employer-centered helpers (e.g., Plawin, 1987, and Walker, 1968) indicate that employment success is a function of having job goals, knowledge, and skills; facilitative job-seeking behaviors; and job-retention skills, particularly human relations skills that are acceptable to the employer.

Professional studies and reports on Black Americans who experience employment success and those who do not, yield up to 30 multiple, interacting positive and negative factors that in one or more studies have differentiated these two groups. Some of the findings are illustrated in studies and reports by Ayers (1967), Eltzroth (1973), Glaser and Ross (1970), Gordan (1969), Houston and Finley (1969), Kunce, Mahoney, Campbell and Finley (1969), Minton (1968), Townsend (1970), and the Virginia Department of Vocational Rehabilitation (1973).

The literature on the issue of client-race as a critical factor in employment success is mixed with respect to whether race or social class is the stronger predictor of success. Studies by Atkins and Wright (1980), which were replicated by Bolton and Cooper (1980), yielded the same finding that Blacks were less successful than Whites in realizing vocational rehabilitation success, but they interpreted the results differently. While Atkins and Wright suggested that race was a significant factor, Bolton and Cooper suggested that the differential outcomes were due mainly to social class differences (particularly in educational achievement) and disability differences (particularly in the greater number of Blacks with the diagnosis of mental retardation). Trying to resolve this issue through a replication of these studies with additional analyses involving samples from other racial groups, Lawrence, Johnson and Associates (1983) found race to be a significant factor in one study, but not in another. More recently, in a study on a relatively young heterogeneous group of persons with disabilities, McCarthy (1986) reported that race is not a significant factor but that educational achievement is. McCarthy also found that the disability labeling of clients was not a significant factor in the realization of employment success.

In a related area concerning race as a significant factor, Danek and Lawrence (1980) examined the possible relationship of client-counselor racial similarity to rehabilitation outcomes and concluded that client-counselor racial similarity was not related to observed differences in rehabilitation success among Black and White clients.

Whether race is ultimately demonstrated to be a critical factor or not, many, if not most, professional Blacks believe that the legacy of racism in the employment success of Black Americans, including Black Americans with disabilities, continues to act as a barrier to success.

The popular literature on employment success among Black Americans, as reflected in magazine and newspaper articles and reports, suggests factors related to employment success, educational and talent development; facilitating support from significant others and systems of support; positive and realistic self-concepts; and achievement motivation, particularly that rooted in religious beliefs. Indeed, the popular literature review reported by Glaser and Ross (1970) identified 14 possible factors, including: identity; alienation; freedom from conditioning; physical removal; luck; supportive and inspiring relationships; identification models; questioning orientation; awareness of alternative paths; new perception of self; existential crisis; risk-taking capacity; channeling of rage; and rewards for change. In my review of the popular literature, which enabled me to identify by name, disability, and employment, nearly 300 Black Americans with disabilities, I found essentially the same themes reported by Glaser and Ross but, perhaps, a greater emphasis on family background and religion as motivating and possibly critical factors. I used both White resources (e.g., daily newspapers, Time, US News & World Report, etc.) and Black resources (e.g., Ebony, Essence, Jet, Sepia, Encore, Black Enterprise, and Black-oriented weekly newspapers).

The educational literature, particularly the work of Sedlacek and associates (Tracey and Sedlacek, 1982), suggested that several noncognitive factors--positive self-concept or confidence, realistic self-appraisal, understanding and dealing with racism, preference for long-term goals over short-term and immediate needs, availability of strong support persons, demonstrated leadership experience, and demonstrated community service--predict educational success of Blacks in predominantly White higher educational settings as well as, and in some instances better than, traditional predictive measures (i.e., scholastic aptitude test scores and high school grade point average) in terms of achievement and retention.

In the attempt to integrate the relevant findings in the literature regarding the factors related to the employment success of Black Americans with disabilities, several points stand out. First, apparently multiple factors are related to employment success. With no particular hierarchy, and interdependent, these factors are probably involved in the employment success of Black Americans with or without disabilities. Second, there appear to be both positive and negative factors, respectively promoting or hindering employment success. Third, not disability labeling, but how the individual interprets the disability, seems to be critical in employment success. Fourth, job-oriented skills--particularly how one adjusts to superiors and peers--relate directly to employment success.

Fifth, personal-social characteristics generated primarily by developmental conditioning in the family--predispose one toward a general sense of hopefulness and achievement that appears to be related to employment and other kinds of success. Self-confidence, sociability, frustration-control, and personal ambition are some of these factors.

Sixth, while race may or may not be a critical factor in employment success social class (i.e., educational attainment, family background and success, and so on) is repeatedly found to be related to employment success. Race, as a factor, however, may be influenced by both external and internal evaluations positively or negatively in interactions related to accessing employment structures and developing in those structures.

Seventh, nothing succeeds like success. Indeed, prior success along a number of dimensions, as a general principle, appears to be very important for employment success. The most general form of this success is developmental achievement in those areas found in Sedlacek's model:

- Achievements or success in relationships, learning, and activities that make one feel good about one's self, one's capabilities, and confidence in predicting and realizing outcomes that will reinforce and enhance personal positiveness and achievement. These achievements, of course, are influenced by the expectations, reinforcements, modeling, and influence of significant others.
- Success in understanding what one can and cannot do with one's knowledge, attitudes, skills, including the use of adapted aids and aides. The realization of this success comes from vigorous reality testing as well as the ability to size up probabilities of achievement.
- Success in dealing with human devaluation and attributions of inferiority because of one's race or disability. Success here is related to the successes previously mentioned. Healthy development through positive relationships and activities--education, habilitation, rehabilitation, and so forth--equips one with the kind of problem identification and problem solving perspective and skills needed for dealing with racism and "handicapism".
- Success in developing and realizing long-range goals and objectives--as opposed to short-range ones--because of the desire to improve one's position, to realize one's potential, and so forth. This implies faith and confidence in future attainments. It also implies skill in goal-setting and the ability to realize those goals and to utilize the cumulative gains from achievement for further achievement.
- Success in having and utilizing support persons and systems for emotional support, learning, guidance, and the opening of doors to opportunity.

- Success in community interactions and service, in leadership or bringing people together to work toward common goals and objectives, and in receiving recognition from people in the community for one's mastery of learning in a valued area of problem identification and problem solving. This type of success is yielded by talent development, successful risk-taking, and involvement.

All of these successes augur well for future success, including employment success.

Model of Critical Factors

A modification of the model developed by Sedlacek was developed to guide this inquiry about the presence of selected factors believed to be critical for employment success in the lives of successful Black Americans with disabilities.

The Sedlacek model was selected for three basic reasons. First, the model has been successfully used in predicting educational success--a form of occupational success--of Black Americans, and it was felt that this success might be related and, perhaps, transferable to the efforts of this inquiry. Second, the factors in the Sedlacek model seemed to be related to and could incorporate, with few exceptions, nearly all of the factors mentioned in the literature as being important for employment success. Hence, the model was both comprehensive and parsimonious. Third, the factors in the model were quantifiable, and the possibility of future quantification as an extension of this inquiry was attractive.

The modifications of the Sedlacek model were simple. First, several factor labels were changed: "Understanding and Dealing With Racism" was changed to "Understanding and Dealing With Devaluation" to point to the common element in both racism and "handicapism". "Prefers Long-Range Goals To Short-Term or Immediate Needs" was shortened to "Preference For Long-Range Goals." "Availability Of Strong Support Person" was shortened to "Availability of Strong

Support," and the meaning of this factor was broadened to include support persons, support systems, and support thoughts (e.g., religion). "Knowledge Acquired In A Field" was changed to "Specific Knowledge" and broadened to include any type of knowledge that had been achieved and recognized as being valuable by others. Second, a "Family Background" factor was added to take into consideration the stability of early childhood and the developmental years through intactness of the family and the role of the parents or surrogates in the facilitation of the achievement in the subjects of moral teaching and the work ethic. Third, because the model was to be applied to persons who were already successful, another factor, the so-called dependent variable, "Career Pattern," was added to provide some review of career stability or variability, work effectiveness, and work satisfaction and love.

These modifications, then, yielded the following ten factors, the first as dependent factor, and the others as independent or influential factors:

1. CAREER PATTERN (CP). The presence of facilitative stability or variability in the occupational pattern; evidence of work effectiveness and work satisfaction/love.

2. FAMILY BACKGROUND (FB). The presence of family intactness; at least one strong, moralistic, and loving parent or surrogate; family achievement and the work ethic that could be modeled; and the marital satisfaction and personal happiness of the person being profiled.

3. POSITIVE SELF-CONCEPT OR CONFIDENCE (PSC). Strong self-feeling, strength of character, determination, and independence as reflected by evidence of religious or spiritual meaning in one's life; educational or talent goals and confidence; sense of humor and balanced seriousness; competitive confidence, assertiveness, and risk-taking; and secure, stable values and beliefs about the self.

4. REALISTIC SELF-APPRAISAL (RSA). Recognizing and accepting assets and deficiencies, especially academic and personal, and working hard at self-development and recognizing the need to broaden individuality through channeling/managing hostility, anger, and rage; having a questioning orientation; learning from risk-taking and reality testing, problem identification and problem solving,

and tenacity and persistence in goal pursuit; gaining insight into one's comparative asset values and subordinating one's limitations; and mastering one's transportation, mobility, and personal care needs.

5. UNDERSTANDS AND DEALS WITH DEVALUATION (UDD). Realism orientation based upon personal experiences of racism and "handicapism"; commitment to fighting to improve existing system and not being submissive to existing wrongs, hostile to society, or a "cop-out"; and ability to handle in person interactions and transactions the devaluative assumptions that are inherent in both racism and "handicapism".

6. PREFERENCE FOR LONG-TERM GOALS (PLT). Able to respond to deferred gratification as evidenced by educational/talent aspirations and achievement; planning knowledge and skills; skills in differentiating ends and means; and tenacity in movement towards ends.

7. AVAILABILITY OF STRONG SUPPORT (ASS). Identification with models/heroes; recognizing the value of outside influence and help; receiving and accepting help from White persons and institutions; utilizing vocational rehabilitation services; facilitating and accepting work accommodations and the use of aides and adapted devices; responding well to directive counseling and guidance; having someone to turn to in times of crises who extends understanding; having the support of family and friends; and having deep religious support and beliefs for integrating and transcending difficulties.

8. SUCCESSFUL LEADERSHIP EXPERIENCE (LE). Effective use of one's communication skills, influence and assertiveness; being looked up to by others; and being elected or selected to positions of leadership.

9. DEMONSTRATED COMMUNITY SERVICE (CS). Evidence of identification and activity with one's community and of helping others in the community.

10. SPECIAL KNOWLEDGE (SK). Evidence of educational/talent achievement; disability knowledge and achievement; interest and achievement in a hobby or special field; and demonstration of the presence of knowledge through teaching, writing, consulting, and so forth.

Application Of The Model

Subjects

The subjects for this study were seven successful Black Americans with disabilities who had been identified in various publications and public sources and on whom the available information was sufficient for purposes of the study.

Because of the exploratory case study approach, seven subjects were considered adequate for the investigation.

Seven subjects were selected from 40 persons in the writer's data base of 300, Black Americans with disabilities. Sufficient data on 40 persons in this data base were sufficient for the analysis. Four selectees were males; three were females. They ranged in age from 39 to 85, with a mean age of slightly more than 54 years. Two of the subjects were born with impairments, two experienced disability during their teen years, and the other three experienced disability in their adult years after being successful as temporary able-bodied persons. Although type of disability was not a primary consideration in the selection of the subjects, three were impaired by blindness, one by dwarfism and the absence of hands and arms, one by amputations of both arms above the elbow, one by multiple sclerosis, and one by quadriplegia. All had career patterns that extended over many years and warranted their being judged as successful in their occupations. Although five were born and six were reared in the South, the career success of two was in the North; and the success of four was both in the North and South and other geographic areas. Thus, the subjects were selected because of their recognized occupational success as Black Americans with disabilities because of their ages at the onset of their disabilities, and because sufficient data were available on them for the profiles and analyses needed by this study.

The subjects were:

> Charles Walker, 39-year-old Executive Director of the Police Community Dialogue Program in Akron, Ohio. Charles was born with impaired vision, became totally blind at age 18, was also erroneously considered to be mentally retarded, and did not attend formal education classses until he was age 23.
>
> Shirley Price, 41-year-old Manager of the Federal Women's Project and EEO Specialist at the Johnson Space Center in Houston, Texas. Shirley was born without arms and hands and is a dwarf.

Donald Galloway, 48-year-old Rehabilitation Administrator and disability advocate in Washington, D.C. Don became blind as a result of an accident at age 16.

Phillip Rushing, 54-year-old Minister and Social Worker. Phillip was born on a Mississippi plantation and became an upper-arm-bilateral amputee at age 16 as a result of an electrical accident.

Carrie Turner, 85-year-old Retired Social Worker, a legend in her work with the blind in Cleveland, Ohio. Carrie became blind at age 28.

Shirley Jordan, who was diagnosed as having multiple sclerosis at age 28 and died 20 years later at age 48 following a brief illness. She was a professional volunteer and civic activist.

Roy Campanella, now 65 years of age and the Director of Community Relations for the Los Angeles Dodgers baseball organization. Roy became a quadriplegic at age 37 as a result of an automobile accident which terminated his career as an outstanding major league baseball player.

Application Procedure

The biographical materials on each of the subjects were reviewed at least three times for evidence of the presence of the factors in the model. Where the presence of a factor was found or could be inferred, a notation was entered in the appropriate factor section of the draft of the person's profile. Then the profiles were written. The total time spent reviewing the information on a person and drafting and redrafting a profile varied considerably from person to person. The review times varied roughly four to forty hours. Briefer review times were needed for Price, Galloway, and Jordan because of the limited amount of information available on them. Significantly longer review times were needed to absorb and distill the information available on Walker, Turner, Rushing, and Campanella. The actual writing of a profile ranged between four and eight hours with an average of between five and six hours.

A completed profile followed the following outline:

Biographical Sketch--includes information on disability, family background, education, occupation, recognition, hobbies, religion, marital status, and references.

Positive Self-Concept Or Confidence

Realistic Self-Appraisal

Understanding And Dealing With Devaluation

Preference For Long-Term Goals

Availability Of Strong Support

Successful Leadership Experience

Demonstrated Commmunity Service

Special Knowledge

Comments--includes the writer's appraisal of the psychological qualities believed to be possessed by the person and operant in his/her life as guided by an analysis of all available information.

Analytical Procedures

After all of the profiles were completed, a grid listing vertically each of the factors, including the dependent variable, and its components or subfactors and the names of the subjects horizontally was constructed to facilitate a comparison of the persons qualitatively on each of the factors and subfactors and on the relationships among the factors.

Limitations

As an exploratory initiative, this study has the same limitations of most exploratory studies. All exploratory or formulative studies have as the major purpose the discovery of insights or ideas for the purpose of formulating more precise research problems or hypotheses (Seltiz, Jahoda, Deutsch & Cook, 1964 p. 50).

Such studies, therefore, allow the researcher flexibility for considering many different aspects, methodologically and otherwise, of the problem being studied to clarify concepts and priorities for further inquiry. In terms of the methodological license granted me by this type of study, I constructed (but did not employ) reliability or validity checks by judges of the model, profiling procedures, profiles, or of the analytic procedures and analyses.

The results, therefore, were dependent upon my information gathering skills and intensity in reviewing the information and constructing the profiles and in my integrative powers to draw together diverse information into a unified interpretation. Thus, the final result is a speculative or unproved but promising report of factors believed to be critical in the employment success of Black Americans with disabilities.

Profiles

In this section, the profiles on the seven successful Black Americans with disabilities selected for this exploratory study are presented. The presentation sequence is based on the ages of the persons at the onset of their disabilities. Hence, Walker and Price, who were born with impairments, are profiled first; followed by Galloway and Rushing, who experienced disability during their teen years; and then Turner, Jordan, and Campanella, who experienced disability after they had already achieved success as adults. This sequence provides some appreciation for the developmental challenges generated by age differences at the times of disability onset.

Because of space limitations, only the complete profile of Walker will be given. Of the seven persons, Walker's story is particularly dramatic, and for this reason, his complete profile was selected. Abbreviated profiles will be provided for the other six persons. The abbreviated profiles consist of the biographical sketches and the writer's comments.

Charles Walker

Biographical Sketch

Disability. Charles was born with partial blindness and considered by authorities to be mentally retarded. After age 18, he was totally blind. Following the removal of the mental retardation attribution, he learned Braille and how to use a cane and adapted equipment.

Family Background. Born April 2, 1947, in Akron, Ohio, Charles was sent almost immediately to live with his grandmother in Port Gibson, Mississippi (a small town with three stores). She raised him until age nine when he was returned to Akron to live with and be raised by an aunt. He currently resides in Akron.

Education. Charles had no formal education until age 23. As a child in Mississippi, he was rejected for public schooling because of his visual impairment and purported mental retardation. When he returned to Akron, he was also rejected for public education. His informal education was guided by his grandmother in Mississippi, who helped him to adjust to his plantation-type environment, including learning about animals and the natural surroundings, picking cotton, and relating to peers, adults, and religion. In Akron, his aunt read to him, and he learned from listening to the radio and television about sports and politics--subjects he became interested in--and from interactions with others on the streets. When "boredom" set in at age 23, he applied for vocational rehabilitation services. Initially, he was rejected by a service facility for instruction in Braille and mobility training because of his lack of formal schooling and purported mental retardation. However, after being referred to the Vocational Developmental Center for the Handicapped in Akron for appraisal of his vocational potential and readiness for employment in a sheltered workshop, an appraisal of his memory and reasoning abilities revealed that he was bright, not retarded, and generated a rehabilitation plan that included the learning of Braille, mobility and personal adjustment training, and classwork and instruction for the GED examinations. Although it was projected that it would take him five years to make up for his educational deficits and complete his preparation for the examinations, it took only two years, and at age 27, he became the first blind person in the county to pass the examinations in Braille. Almost immediately, he enrolled at the University of Akron, secured all A's during his first semester and then went on to attain his bachelor's degree in political science and history with honors at age 32. He then enrolled for graduate studies in political science, enriched his studies with practical work experience, and obtained his master's degree at age 37.

Occupation. Almost concurrent with his involvement in vocational rehabilitation, he also became and has remained involved in voter registration, political activities, and political campaigns--presidential, senatorial, gubernatorial, state representative, county commissioner, mayoral, and councilman--in all phases, ranging from the distribution of campaign literature, organizing and coordinating group efforts, to providing advice and counsel on the problems and prospects of Black citizenry. He also has run unsuccessfully for political office (state representative) twice. During his studies at the university, he worked as a volunteer at a nursing home, sold insurance, and he also became involved in student government, academic and social fraternities, the NAACP and Community Action Council (serving on these boards), Frontiers International (serving as local historian), and other community organizations. As a graduate assistant, he taught freshmen history courses, and he also continued his work in politics. At age 36, he was named Executive Director for the Police Community Dialogue Program in Akron, Ohio, the position he now holds. During these work years, he has also been in demand by community groups to speak on blindness, raising children with handicapping conditions, and the education and rehabilitation of persons with disabilities.

Recognition. Charles' success in passing the GED and his successes in college received newspaper and radio recognition. His recognition in college included election to student government--of which he later became vice president --his selection for *Who's Who Among Students In American Colleges and Universities*, and his membership in Alpha Phi Alpha social fraternity, where he became the campus and then state president. A scholarship fund honoring him has been established in his name at the University of Akron. He has also been recognized for his work and advice in political campaigns and for his campaigns for elective office. In 1983, he was recognized nationally as an "Outstanding Young American."

Hobbies. Public speaking, political history, senatorial politics, and golf for the blind.

Religion. Although not mentioned in the sources, Charles is viewed as being religious.

Marital Status. Single.

References. *Akron Beacon Journal* (1977), *Cleveland Plain Dealer* (1977), "from the hilltop" (1977), Koester (1984), Leavy (1980), Proctor (1983), and Spoonster (1985).

Positive Self-Concept Or Confidence

Charles has said, "Failure is not in my vocabulary...I'm going to make it" (*Akron Beacon Journal*, 1977, p. B-1). This expression of self-confidence really came after the retardation labeling was replaced by the attribute of brightness and accompanied with external expectations and reinforcements for academic and work success.

Although considered retarded until age 23, his interactions and transactions with his peers in growing up must have convinced him that he was able to learn. Because his informal education was to a large extent the result of informal tutoring on the part of his grandmother, aunt, and others during his developmental years, including radio and television newsmen and commentators, he related closely to adults and adult conceptions. This identification with adult models probably contributed much to the development of his positive self-concept.

Realistic Self-Appraisal

With respect to his qualifications for his current position, Charles has said: "By having a single parent (his grandmother and then his aunt), I understand the frustrations of today's teenagers, and through my experience and contacts in politics, it's given me an understanding of the community" (Proctor, 1983).

Significant realistic self-appraisal for Charles did not come until he met the professional staff at the Vocational Development Center for the Handicapped. They not only removed the mental retardation attribution, but also told him that he was intellectually capable of significant achievement, and he believed them. With the help of their advocacy and support, he began to disprove the negative attributions that had been attached to him and demonstrated that he could, indeed, learn quickly, use his learning in groups and political situations, assume positions of leadership, teach at the college level, and win broad public support for activities and causes.

Urging hard work and vigorous reality testing, Charles explains, "If you put your mind to it, you can do anything you want. I wanted an education and was determined to get it. But the first step is to prove to the public that you are a normal person" (Leavy, 1980, p. 50).

With respect to raising children with impairments, Charles states: "We have to educate the parents of handicapped children because the worst thing they can do is to pamper, shelter and feel sorry for them. The best thing parents can do is to let the children perform any function they feel they can handle, which will give them a sense of confidence and a feeling of belonging. Give them certain responsibilities and make sure they carry them out" (Leavy, 1980, p. 50). Like the quote attributed to Helen Keller, Charles knows that "A person who is severely impaired never knows his hidden sources of strength until he is treated like a normal human being and encouraged to shape his own life."

Understands And Deals With Devaluation

Mainstreaming is a strong orientation of Charles, and with this orientation, it would seem that the sources about him would address barriers associated with racism and "handicapism", and the perceptions Charles holds of these barriers and his strategies for coping with them. Unfortunately, they do so only in alluding to the effects these types of assumptions have on developmental opportunities and achievement.

Nevertheless, like an innocent person convicted of a crime he didn't commit with respect to early limitations imposed on him by the judgments of others, Charles poses his accelerated development as a powerful challenge to many assumptions about human development, including the boundaries of critical learning periods and the debilitating interaction of race, poverty and disability on development. His life, therefore, is a catalyst for confronting and facilitating changes in the thinking, feeling, and behavior of others. Because he is an effective person and his life challenges the validity of many assumptions, he is able to confront and deal with devaluative assumptions which make up the core of racism and "handicapism".

Preference For Long-Term Goals

What has been said earlier points to Charles' preference for long-range goals. Familiar with goal-setting through rehabilitation and education successes as well as through participation in the local, state, and national programs for the historic White House Conference on the Handicapped, Charles reflects on the future: "Since so many people have helped me, I want to dedicate my life to others by trying to improve the life of underprivileged people...I consider the political arena the best path to achieve this because it provides a platform to speak out and affect the important issues of the day" (Leavy, 1968, p. 50; also, see *Cleveland Plain Dealer*, 1977, pp. 1-A, 14-A). With this perspective, his long-range goal is to become a state representative and then a United States Senator.

Availability Of Strong Support

Charles did not know his mother and father, who now are dead, but he received the support of his grandmother and later his aunt during the years he was under their guidance and care. Eventually, after the retardation label had been removed, he received the support of vocational rehabilitation personnel, educators, and significant others.

The triggering and consolidating support force of his accelerated development, however, was Joseph Spoonster, the executive director of the Vocational Development Center, and his son, Bill, who evaluated Charles and found him to be intellectually bright and not retarded. Of the Spoonsters, Charles has said: "They were the first ones to encourage me, to tell me I had a chance. And I really felt like I had a chance, too" (*Akron Beacon Journal*, 1977, p. B-1). Indeed, Charles' extended support system consists of Black and White persons, educated and uneducated, professional and nonprofessional. Most of these persons have been happy to aid him and witness his unfolding development. The support received from others has also been internalized into his motivation as revealed by the following words: "I know what it is to be helped, and now I want to help people myself" ("from the hilltop," 1977, p. 4).

Successful Leadership Experience

Of his leadership skills, one admirer has said: "I met Charles when he asked me to work on the campaign. I found him to have an outstanding ability to inspire people to contribute their skills to activities which he is coordinating. He encourages people to work together and energizes them with his dedication. Our changing society needs this kind of leadership" (Koester, @1984).

As Charles accelerated, his leadership skills were recognized and widely utilized: student government representative, senator, and vice president; campus president and state president of his social fraternity; board membership and board president of the Community Action Council and board membership of the local NAACP Branch; aiding significant others in their political campaigns for election; and his own running for state representative. His knowledge of politics and his skills in speaking and group leadership combined with his motivation to serve and help others have been of tremendous aid to him as a leader.

Demonstrated Community Service

Given the above information, enough has been said about his service to the community.

Special Knowledge

Charles' special knowledge of baseball and politics helped to explode the myth of his mental retardation. His accelerated academic development along with his human relations skills resulted in his being elevated to leadership roles. His knowledge of politics enabled him to move into and contribute to political processes. His special knowledge of disability has enabled him to help many others to understand, accept, and appreciate persons with disabilities.

Comments

Charles Walker's story needs to be told, and although he has been encouraged by many to write his life's story, up to this point, he has declined. Nevertheless, the elements in his life changed when beliefs about him changed, beliefs both outside of him and inside of him. He became aware of his possibilities and began to realize those possibilities, and his life is still in process.

He shows a natural devotion to people, is advisory, responsibility-bearing, and has a deep dedication to human growth and development, and to getting people to work together for goals, including the facilitation of each other's development.

His mental ability is creative and better than that in most Pygmalion-like stories because it is more profound. He is a stereotype-busting person who works hard, enjoys work, knows himself and his limitations, and works with high effectiveness within those boundaries.

Would his story have been different had his early childhood experiences been different and had he enrolled in school and had the support of an intact family? We honestly do not know; but we do know that once the truth about his intellectual capacities became manifest and accepted, this truth set him and many others who had negative assumptions about him free from that negativism.

Perhaps, the best commentary about Charles is that of Joe Spoonster (1985), the man who was a key figure in the liberation process of Charles: "So it appears that the key to this outstanding young man's success was when the environment made him feel important as a person, along with the confidence that he could achieve any goals he set for himself. This is the American way of life .....When you consider that Charles was labeled 'blind and mentally retarded' since birth, his life story is one of the 'Greatest Stories Ever Told.'"

Shirley K. Price

Biographical Sketch

Disability. Shirley was born without hands and arms and is also a dwarf (4'6"). In addition, she has been predisposed to falls or accidents which have been followed by temporary paralysis of her legs and other problems. She drives an adapted automobile and uses other adapted aids.

Family Background. Shirley was born on March 9, 1945, to loving and supportive parents in Hitchcock, Texas, a small town midway between Houston and Galveston. She is one of 15 living brothers and sisters. Her parents also care for five foster children.

Education. Shirley attended and graduated from the segregated schools of Hitchcock. Then with the assistance of the state vocational rehabilitation agency, she attended Texas Southern University, majoring first in music and then changing her major to sociology. During her senior year, she attended an exchange summer session at the Univerity of Wisconsin. She had considered graduate work in social work at Wisconsin but chose instead to get her master's degree in guidance and counseling at Texas Southern. She is currently working on a doctoral degree.

Occupation. The sources reveal nothing about Shirley's early or college work opportunities and responsibilities. As an adult, however, she has worked steadily since the summer of 1974 at the Johnson Space Center of NASA in Houston, first as an administrative assistant in the Physics Department; then for seven years as coordinator of several handicapped employee programs in the training office; then as the Selective Placement Coordinator for the Handicapped in the Equal Opportunities Office; and, finally, since 1983 as the manager of the Federal Women's Program while continuing as an EEO specialist. In brief, she helps handicapped individuals at the Space Center and elsewhere.

Recognition. Although Shirley is viewed by those who know her as being an outstanding and inspiring person, the sources make no mention of her receiving awards or recognition except for her very good high school grade point average, her acceptance by two universities for both undergraduate and graduate studies, and her steady rise in responsibility and position at the Space Center.

Hobbies. Shirley likes to sing, and when she has time, she likes to paint.

Religion. Shirley has been a member of the same Baptist Church since the age of seven, and she sings in the choir.

Marital Status. Although she is single, she hopes one day for a happy marriage.

Reference. Price (1986).

Comments

Shirley Price's life is based on a deep religious conviction that she is here to fulfill a mission, and "With God", all things are possible.

Her intellectual ability, drive and determination, early childhood support from family and significant others, and her inventiveness, assertiveness, and risk-orientation have enabled her to manage the handicapping effects of multiple disabilities to achieve personal, educational, and employment success.

She is competent, dedicated, and loyal in her work, and she is an inspiration to all who have come to know her. Her aspirations are high, and she knows that her God is not finished with her development and success.

Donald Abasi Galloway

Biographical Sketch

Disability. Don was blinded in an accident at age 16. He travels with a cane and uses other adapted equipment.

Family Background. Don was born in the District of Columbia on March 21, 1938. He is one of eight brothers and sisters.

Education. After blindness, Don attended the Maryland School for the Blind for a short period of time. After the family moved to Los Angeles, California, in 1954, he attended and graduated from high school. Then he attended and received an Associate of Arts degree from Los Angeles City College, followed by attendance at California State University from which he received a Bachelor of Arts degree and a Master's degree in Social Work. As a professional worker, he has attended many workshops and continuing education programs related to his employment responsibilities.

Occupation. No information was given in the sources about his childhood and school work activities. However, while just out of high school, he began using his musical and writing skills to share Black history and experiences by performing educational entertainment through the National Assemblies in North Hollywood. After receiving his master's degree in 1969, Don conducted independent research throughout Central and South America for a year-and-a-half on the social, political, and economic status of Black people throughout the continent and established the groundwork for an international network for communication among Black people throughout the continent. Upon his return to the United States, he held a series of positions in the West, beginning in San Diego as a developer of a community-based health delivery system while he served as Assistant Chief of Community Health Programs in the University of California's Community Medicine Department; then to Berkeley, California, where he served initially as the Director of Services for the Blind at the Center for Independent Living--the first center of its type--and later as the Director of the Center; and then to Denver, Colorado, where he served as the Executive Director of the Colorado Governor's Council on the Handicapped. In 1978, his attention again turned to international service, and he was appointed and served for three years as the Director of the Peace Corps in Jamaica, West Indies. Upon his return to the United States and the District of Columbia in 1981, he worked as a volunteer for the Red Cross of Montgomery County supervising and coordinating the elderly shopper's program before becoming the Executive Director of the D.C. Center for Independent Living.

Recognition. Although the sources do not list the recognition and honors Don has received for his work and achievements, it is certain that he has been honored.

Hobbies. None was listed in the sources.

Religion. Nothing was mentioned in the sources about his religious beliefs or affiliation.

Marital Status. Don is married, and he and his wife, June, have two children, Makin and Ade Basuti.

References. Brazaitis (1983), Galloway (1986), and The Disabled Washingtonian (1986).

Comments

Cultured and refined--a kind of renaissance man, talented and creative, impeccable in dress, introspective, risk-oriented, and articulate with conviction, Don Galloway is skilled in getting new projects started and is a true pioneer and warrior for social change.

Moreover, with this lifestyle orientation, he is very familiar with the frustrations and misunderstandings as well as the joys generated by his convictions and initiatives.

Critical, versatile, and adaptable but not easily moved in his convictions, he is also a good "mixer" when he is in the mood, and he is loyal to his friends and professional confidantes.

A great reader, listener, and dreamer, he is intellectually quick, has the qualities of a great salesman, and is a good judge of human nature.

Influenced by his past research, administrative, and cross cultural successes, Don seems to experience a conflict at this point in his career development between love of travel with new involvements and his desire to give time to study and complete some works already initiated. Clearly, he has an agenda ahead of him that is unfolding, and his visual impairment since age 16 has limited him only slightly.

Although the sources do not provide information on his childhood development, it seems reasonable to say that his successful development as a child and adolescent before the onset of his blindness has augured well for his development and the integration of his blindness as an adult.

Phillip Van Rushing

Biographical Sketch

Disability. As a consequence of an electrical wire injury at age 16, Phillip underwent upper-arm bilateral amputations. In 1958, at age 26 and after graduation from college, he began wearing artificial arms. He also has need for an attendant.

Family Background. Phillip was born around 1932 on a Mississippi plantation, the oldest of two brothers and a sister. He lived with and was reared by his grandparents until age eight, when his grandfather died. Then he went to live with his mother and father and siblings on another plantation.

Education. Phillip started school at age eight in a one-room schoolhouse on the plantation and remained in school until his impairment at age 16. During 1950, a year-and-a-half after the impairment, he entered Saints School, a preparatory school sponsored for Blacks by a church, and he remained there until 1951 when he enrolled at the Southern Christian Institute, another church sponsored junior college for Blacks in Mississippi. Because of his late start in school, he was typically four years older than his peers. From 1952 to 1956, he studied at Stillman College in Tuscaloosa, Alabama, and he received his bachelor's degree with magna cum laude honors at age 23 or 24. He then enrolled for graduate studies at the Lexington Seminary and the University of Kentucky in March 1958. At the time his autobiography was published in 1984, he was enrolled at the Chicago Theological Seminary in the doctoral programs for the Th.D. degree.

Occupation. Throughout his life, Phillip has worked. As a child, he picked cotton and did other chores on the plantation. After disability and during his school years, he sold magazines (won a Time-Life publication subscription contest), advice to peers for 25 cents per session, peanuts, and newspapers to partially support himself. He also became a speaker in the fundraising efforts of his prep school, and he gave speeches in many cities in the South. He was called to the ministry and began preaching at age 19 while still a student. As he progressed, he successfully combined his vocations of pastoral ministry and social work. He has also held positions in administration and social work in Kentucky, Illinois, D.C., and Mississippi. In 1986, he was serving as the pastor of the Disciples for Christ Church in Montgomery, Alabama.

Recognition. For his academic work, he was honored for his grades, and he graduated with honors. He also received scholarship assistance from all of the institutions he attended. For his campus leadership activities, he was the May Day King during his first year at Stillman for raising money for the college. He was also honored for public speaking at fund-raising events. During his sophmore year at Stillman, he was elected Sunday School Superintendent. During his junior year, he was elected president of the men's dormitory. For his community service, he has been recognized by many governmental, religious, and community organizations, including the U.S. Department of Labor for his work as chief counselor in a Mississippi Community Action Program. He was also recognized as one of the "Ten Outstanding Young Men of America," and his autobiography, Empty Sleeves, has received favorable reviews. To him, his greatest recognition has been of a personal nature--knowing that he has done good work in accordance with his religious calling and commitment.

Hobbies. His hobby is his work. He also enjoys shopping for clothes at Goodwill Industries.

Religion. Disciples for Christ Minister.

Marital Status. Phillip is married to Mildred Ann Parks, and they have three adult children and one teen-ager.

Reference. Rushing (1984).

Comments

Bright, reflective, a lover of learning, inventive, adaptable, goal oriented, and of strong emotional nature, Phillip is not only good before the public, but he is a man thorough in his thinking and operations. Phillip's story is one of both synergy and transcendence--bringing the pieces of his life together in meaning and then going beyond that meaning to newer and higher levels of meaning.

As the jacket to his book, Empty Sleeves, reads: "He was poor. He was Black. He was Handicapped. To many people in America, any one of these might seem an overwhelming barrier to success. To Phillip Rushing, for whom all three were reality, they were opposition turned into opportunity."

In a sermon, Phillip spoke of his disability, his religious conversion and his commitment in the following terms: "But my problem was not that I didn't have any arms--only empty sleeves. It was that I had an empty life--one that didn't have Jesus in it. If I had, I could have overcome so much easier, for I was no match for what I was up against." He then recalled the time when he experienced this vision--this ultimate reality for him: "In the transformation, God reached down and lifted me out of the jaws of hell! He gave me faith and commanded me to look up. And when I looked up, I saw millions of hands floating without bodies. And the voice said: 'These are my hands, and wherever you go, they will be made available to you.' I've been in a contract with God ever since, in gratitude for what he did for me. From that point, there has not been an end to God's blessings."

The testimony of Phillip Rushing, then, is the testimony of victory and success through faith.

Carrie Starks Turner

Biographical Sketch

Disability. Carrie has been totally blind since age 28. She learned Braille, used a cane for a short while, and then had three guide dogs who served her well through the years.

Family Background. Carrie was born July 1, 1901, and reared in Griffin, Georgia. The sources reveal nothing about her childhood years or parents.

Education. Carrie attended the public schools of Griffin, Georgia, and then Tuskegee Institute in Alabama from which she received an Associate of Arts degree in 1923. Before blindness, she took social work courses in community problems at Northwestern University; after blindness, she took courses on working with the blind at Western Reserve University and Michigan State University.

Occupation. Before blindness, she worked at the Phillis Wheatley Association, a settlement house for young Black females in Cleveland. Then, for two years, she worked for the Urban League of Pittsburgh, Pennsylvania. After becoming blind, she worked for seven years as a volunteer at the Cleveland Society for the Blind, and then for 33 years, as a social caseworker and group-worker at the Society. Initially, she developed many different, outstanding, and lasting programs for Black persons impaired by blindness. Although she retired in 1968, Carrie has continued to speak to groups on blindness, work with senior citizens, and give speeches on behalf of the United Way. She continues to reside in Cleveland.

Recognition. Carrie has received many awards, including awards from the Urban League, United Way, Tuskegee Institute, Pittsburgh Courier, social work and community organizations, and the U.S. Department of Health and Human Services (Outstanding Handicapped Citizen of the Year, 1982).

Hobbies. Travel (U.S., Canada, Mexico, and Europe) and photography (her pictures have been published in a newspaper and magazine and shown on television).

Religion. Baha'i, very active.

Marital Status. Formerly married, divorced (after blindness), no children.

References. Sherman (1986) and Stokes (1980).

Comments

Carrie Turner's relationships with her clients emphasized individual attention, care, and development. She invited them to live beyond survival; to grow and develop; to be attractive; to be independent, competent, confident, and productive; to travel, learn, and fellowship; to laugh and relate their experiences; to become first class citizens; and to share in the social, cultural, and economic life of the community, city, state, and nation.

She affiliated herself, almost with a death-do-we-part commitment, with an agency that helped her and that she helped. She was their "darling," and the agency was her vehicle for accelerated development, the actualization of her values and dreams, and the building of an extended and productive family which rarely, if ever, has been duplicated.

Her religion, too, was a powerful motivator and source of security. In accordance with her religious beliefs, she made friends throughout the nation and also in some foreign countries. She extended love to all. Very simply, with her religious inspiration, she was an authentic, bright, warm, cheerful, dedicated, and determined person who went about doing good, organizing persons for full human development, teaching and speaking and taking pictures, and serving as a role model of human effectiveness, worthy of emulation.

Because Carrie cared and was effective, others--many others--cared for her, and significant others recommended her for awards and recognition that were given so generously by many organizations.

Many of her achievements came after age 50 and 22 years of visual impairment. In terms of this, one lesson of her life is clear: It is never too late to accelerate in life, to make facilitative developmental choices, and to pursue fulfillment and happiness with vigor.

Carrie Turner is, indeed, not only an outstanding individual with the impairment of physical blindness, but she is a remarkable human being with super inner-vision and unspeakable joy. She is an outstanding model of personal and employment success. She still lives, and her beauty, truth, and goodness keep marching on.

Shirley Yarbrough Jordan

Biographical Sketch

Disability. Shirley, at age 28, was diagnosed as having multiple sclerosis, and she became increasingly disabled and handicapped by the progressive effects of this mysterious disease. To get around, she used a cane, then a wheelchair, and, finally, a Porta-Scooter. At times, she was bedfast and required attendant care. After a brief illness, she died on December 29, 1985, at age 48 in New York City where she and her husband lived in a spacious apartment overlooking Central Park.

Family Background. Shirley was born in 1937 in Atlanta, Georgia, the second of two daughters in a very supportive, protective, and loving family. Her mother was very gentle, a quality Shirley identified with and admired. She also had a warm and loving relationship with her grandparents, particularly her maternal grandparents.

Education. Shirley attended and graduated from the public schools of Atlanta. Then, she attended Howard University in Washington, D.C., for her bachelor's degree.

Occupation. Before disability, Shirley worked as a caseworker and then supervisor--the youngest Black woman supervisor at that time--for the Fulton County Welfare Department in Atlanta. After disability, she served as an active volunteer for the National Multiple Sclerosis Society. She also wrote articles on coping with multiple sclerosis which were published in Ebony and Good Housekeeping magazines. She was known as a civic activist.

Recognition. She was recognized for services provided to community organizations and for her writing.

Hobbies. Her hobbies were reading, shopping, entertaining, traveling, sightseeing, attending plays, visiting museums, and meeting fascinating people.

Religion. Although the sources indicate that she was religious and attended church, her religious affiliation was not mentioned.

Marital Status. Shirley had a long and happy marriage to Vernon Jordan, lawyer and president of the National Urban League. They had one daughter, Vicki, with whom she had a very close relationship.

References. Jet (1968) and Jordan (1980).

Comments

During Shirley Jordan's 48 years of life--20 with multiple sclerosis--she was representative of the Black Americans with disabilities who enjoyed advantages due to their family, education, employment, and marriage successes prior to and after the onset and progression of impairment, disability, and handicap.

Although one is never fully prepared to deal with such a disability as multiple sclerosis, Shirley--by virtue of her development and successes-was better prepared than most persons.

Indeed, she was articulate in writing and speaking, and her realistic adaptation to multiple sclerosis was not only remarkable but exemplary. Overall, she was intellectual and inspirational, practical and theoretical, logical and philosophical, generous in her contributions and magnanimous in her adjustment, and she remained busy, cautiously optimistic, gentle, loving, and did not isolate herself from the social and intellectual mainstreams of life.

Her tastes, for the most part, were quiet, and this sensitive lady was conscientious, a lover of home and family, and devoted to friends and persons with chronic illnesses. As her condition worsened, Shirley seemed to increase in wisdom as a "woman of resourcefulness, courage and compassion."

Roy Campanella

Biographical Sketch

Disability. Roy became a quadriplegic at age 37 in January 1958 as a result of an automobile accident and as he approached the end of his playing career as a star catcher for the Brooklyn Dodgers major league baseball team. He was a model patient and rehabilitant, and he needs one or two attendants, the assistance of family, adapted equipment, daily exercise, and transportation assistance.

Family Background. Roy was born November 19, 1921, in Philadelphia, of a White father who sold vegetables and fruit and a Black mother. He was the baby in the family and has two older brothers and two older sisters. He lived with his parents until age 16 when he began his pro-baseball career. His parents were strict, loving, and religious.

Education. Roy dropped out of high school at age 16 to pursue his baseball career. In school, he was an average student, mechanical arts was his favorite subject, and his favorite teacher taught physical education.

Occupation. Roy worked from early childhood, first by helping his father, and then by delivering milk both individually and with his oldest brother. He also sold newspapers and shined shoes to earn money. He started playing and identifying with baseball as a child, but he was also good in other sports. In terms of his career, he progressed from amateur baseball as a catcher to semi-pro and then to pro-baseball in the Negro leagues for ten years followed by ten years in the National League. He was the second Black player signed by the Dodgers; Jackie Robinson was the first. In the off-season, he barn-stormed with Black all-stars, and he played winter ball in Puerto Rico, Mexico (he also managed a team there for two years), Cuba, and the Dominican Republic. During World War II, he was not drafted because of his marriage and parental status, but he was required to work for a brief time in some defense plants before he was permitted to return to baseball. Before and after disability, he owned and managed a successful carry-out liquor store in Harlem. After disability, his contract with the Dodgers was extended for life, and he has coached catchers and pitchers, taught in baseball clinics, scouted, and now serves as the Director of Community Relations for the Los Angeles Dodgers. He has also worked as a radio sports commentator, hosted his own sports show, and has had a newspaper column.

Recognition. Before disability, he received many baseball honors for his outstanding play at all levels--amateur, semi-pro, and professional. He was consistently named to the National League's All-Star Team, and he won the Most Valuable Player Award three times. He set many records for catchers and was viewed by many experts as one of the best catchers of all time. He also received recognition for community service activities, including a B'nai B'rith plaque for "High Principles And Achievement in Sports" and the baseball writers' "Player of The Year Award" from the New York Kiwanis Club. The baseball writers honored him as the most courageous athlete of the year in 1958. Finally, he was elected to the Baseball Hall of Fame.

Hobbies. Before disability, his hobbies were fishing, boating, tropical fish, and model trains. After disability, he maintained some interest in model trains.

Religion. His father was a Catholic, but his mother raised him and his siblings as Baptists. Faith, prayer, and reading the Bible daily have been a consistent part of his life and beliefs.

Marital Status. Roy was married twice, fathered two girls during his first marriage and two boys and a girl during his second marriage. Also, he has a step-son from his second marriage. The relationship during his second marriage to Ruthe has been loving and steadfast.

References. Campanella (1959), *Jet* (1984), and Shontz (1962).

Comments

Roy Campanella was born, it seems, to love and play baseball. As a catcher, he had a keen, analytical mind, and he was indefatigable and busy both mentally and physically. He excelled in taking care of the fine details associated with his professional baseball and business responsibilities. As a businessman, he hired good persons and supervised the operations with care and discipline. In both baseball and his business, he worked hard and with intelligence.

As a person, Roy has a sunny personality with plenty of self-esteem and confidence, lots of personal magnetism, and has been very adaptable. He likes others; they like him. He helps others; they help him.

When confronted with severe disability, he brought a background of factors, which singly and in combination, came together to empower him to realize new employment and personal success.

TABLE 1: ASSESSMENT OF PROFILES

FCTRS		SUB-FACTORS	PRI	WAL	GAL	RUS	TUR	JOR	CAM
	1.	Career Stability/Variability	S	S	V	V	S	S	S
	2.	Work Effectiveness	+	+	+	+	+	+	+
	3.	Work Satisfaction/Love	+	+	+	+	+	+	+
	4.	Intact Family	+	-	+?	+?	?	+	+
	5.	Strong, Moralistic, Loving Parent	+	+	?	+	?	+	+
FB	6.	Family Achievement	+	-	+?	+?	?	+	+
	7.	Family Work Ethic	+	+	+?	+	+?	+	+
	8.	Marital Status & Happiness	S+	S+	M+	M+	D+	M+	M+
	9.	Religious/Spiritual Meaning	++	+	+	++	+	+	++
	10.	Education or Talent Goals & Confidence	++	++	++	++	++	+	++
PSC	11.	Sense of Humor/Balanced Seriousness	+	+	+	+	++	+	+
	12.	Cmptv Confidence, Assertive.& Rsk Tkg	++	++	++	++	++	+	++
	13.	Secure, Stable Values/Beliefs	++	++	++	++	++	++	++
	14.	Channeling/Manag. Hostility/Anger/Rage	++	++	++	++	+	++	++
	15.	Questioning Orientation	++	++	++	++	++	++	++
	16.	Risk-Taking Reality Testing	++	++	++	++	++	++	++
RSA	17.	Tenacity, Persistence in Goal Pursuit	++	++	++	++	++	++	++
	18.	Problem Ident. & Prblm Slvg Skills	++	++	++	++	++	++	++
	19.	Comparative Asset Values	++	++	++	++	++	++	++
	20.	Transportation Needs Satisfied	++	++	++	++	++	++	++
	21.	Appraisal of Racism & Handicapism	++	++	++	++	+	+	+
UDD	22.	Commit to Racial & Handicap Justice	++	++	++	++	++	++	++
	23.	Deals Effective w/Racism & Handicapism	++	++	++	++	++	++	++
	24.	Educational/Talent Aspiration & Achvmnt	++	++	++	++	++	+	++
PLT	25.	Planning Knowledge & Skills	++	++	++	++	++	++	++
	26.	Skill in Differentiating Ends & Means	++	++	++	++	++	++	++
	27.	Tenacity in Movement Toward Ends	++	++	++	++	++	++	++
	28.	Model/Hero Identification	+	+	+?	++	+?	+	++
	29.	Recogniz Value of Outside Influence/Hlp	++	++	++	++	++	++	++
	30.	Receives & Accepts Help From white	++	++	++	++	++	++	++
ASS	31.	Receives Help From Voc. Rehab. Agencies	++	++	++	+?	++	++	++
	32.	Work Accommodations	+	+	+	+	+	++	++
	33.	Use of Adapted Aides	+	+	+	+	+	++	++
	34.	Responsiveness to Directive Cnslng/Gdnc	+	+	+?	+	+?	+	+
	35.	Has Someone To Listen n Times of Crisis	++	+	+	+	+	++	++
	36.	Family & Friend Support	++	++	++	++	++	++	++
	37.	Deep Religious Support And Belief	++	+	+	++	++	++	++
	38.	Communication Skills	++	++	++	++	++	++	++
LE	39.	Influence & Assertivenesss	++	++	++	++	++	++	++
	40.	Looked Up To By Others	++	++	++	++	++	++	++
	41.	Elected/Selected To Leadership	++	++	++	++	++	++	++
CS	42.	Identification & Activity w/ Community	++	++	++	++	++	++	++
	43.	Helping Others	++	++	++	++	++	++	++
	44.	Educational/Talent Achievement	++	++	++	++	++	++	++
SK	45.	Disability Knowledge & Achievement	++	++	++	++	++	++	++
	46.	Interest & Achievemnt In Hobby/Spcl Fld	+	+	+	+	++	++	+
	47.	Teaches, Lectures, Consults, Etc.	+	++	++	++	++	++	++

CODES

CP =Career Pattern
FB =Family Background
PSC=Positive Self-Concept or Confidence
RSA=Realistic Self-Appraisal
UDD=Understands & Deals With Devaluation
PLT=Preference for Long-Term Goals
ASS=Availability of Strong Support
LE =Demonstrated Leadership Experience
CS =Demonstrated Community Service
SK =Special Knowledge

++=Component Sig Present
+ =Component Present
+?=Component Probably Present
- =Component Not Present
S =Stable or Single
M =Married
D =Divorced
? =Not Sure

PRI=Price
WAL=Walker
GAL=Galloway
RUS=Rushing
TUR=Turner
JOR=Jordan
CAM=Campanella

Assessment of Profiles

Table 1 provides an assessment of the presence of the critical factors and components in the lives of the seven persons. The codes at the bottom of the table explain the meanings of the abbreviations and symbols that were used.

Overall, the table indicates that these factors and their components were strongly present in the lives of these successful Black Americans with disabilities. Because of space limitations, a full assessment of each factor and its components cannot be given. Therefore, selective comments on each factor follow.

Career Path

Five of the seven had stable employment settings and/or responsibilities in their career paths. Galloway and Rushing, who had variable employment settings and responsibilities, also have professional social work backgrounds with strong civil rights orientations. Nevertheless, whether engaged in variable or stable employment positions, these seven persons were effective in their work and were satisfied with their challenges and contributions. Work love seemed very operant in the life of Carrie Turner, for her work, basically in one setting for a long period of time, was viewed by both her and others as a labor of love.

Family Background

For the most part, the intimacy and development that family backgrounds can teach and reinforce were experienced by the seven persons. Except for Walker, who lived with single parent surrogates, these persons enjoyed the security and guidance that is available within intact families. Also, the presence of at least one strong, moralistic, loving parent and the presence of the work ethic was either obvious or could be inferred in the family backgrounds of these persons. Moreover, whether single or married, all of the persons seemed to enjoy rather happy lives.

Positive Self-Concept Or Confidence

There is little argument about the importance of a positive self-concept and confidence in the achievement of success and well-being. A positive self concept is a powerful statement about one's being and becoming. With little variation, this factor was highly operant in the lives of these seven persons.

The embracing of a religious/spiritual meaning of self was very striking in the lives of Price, Rushing, Campanella, and Turner. The striking aspect was in the synergy and transcendence that this orientation provided these persons. For all, religion or philosophy as a force for organizing and integrating life's experiences into the personality seemed evident and significant.

All of the persons were goal-oriented and developed confidence in their abilities to achieve educationally or, in the case of Campanella, through talent development. In brief, they saw themselves in the process of becoming significant individuals. Although this factor came late in the life of Walker, once he and others recognized his potentials, his goal-setting and confidence accelerated rapidly. In the case of Jordan, where her disability was becoming progressively worse, she still set goals and never lost confidence in her ability to cope. Rushing's development, because of early deprivations, also came late but accelerated rapidly as his achievements were reinforced. In all, achievement motivation was a powerful factor in the development of these persons

Competitive confidence, assertiveness, and risk-taking have been highly operant in the lives of Galloway, Rushing, Campanella, and Price. In addition, the secure, stable values/beliefs of the seven helped to sustain them during crises and represent the windows through which they view the world.

Realistic Self-Appraisal

The information relevant to the presence of realistic self-appraisals in the lives of the seven persons was abundant and clear. Disability and other experiences required them to face reality and to engage in realistic problem identification and problem solving. The insights reported by Rushing, Jordan and Campanella are particularly moving. Since successful employment is the realistic testing and mastering of some aspects of reality, it is no surprise that this factor was a vital part of the lives of these persons.

So often, hostility, anger, rage and their channeling and management are viewed as an integral part of the personality development and adjustment of Black Americans. As the theories go, prejudice, discrimination, and deprivation generate hostility, anger, and rage in Black Americans which they must manage and channel if they are to survive and develop. Typically, the whole range of defense mechanisms are employed by writers to account for the management of these emotions by Black Americans.

Of the seven persons, Galloway and Rushing--both with disabilities during their teen years--were the two who seemed most affected by these emotions. Both, however, worked through some of the problems or experiences that generated these emotions by redefining experiences, developing strong social justice and civil rights frames-of-reference, becoming experts in social pathology and community development, achieving at very high levels educationally and vocationally, and engaging in vigorous problem identification and problem solving initiatives. The dynamics of this struggle are articulated most clearly by Rushing in his autobiography.

The other five, however, seem not to have experienced significant hostility, anger, or rage, and, consequently, did not have to spend considerable amounts of time and effort to channel or manage these emotions. Price, for example, although with a severe disability and Black, seems to have developed without encountering frustrating experiences that generate these strong emotions. Indeed, she claims that she didn't run into racism until she entered the employment market, and, then, this encounter did not generate significant and intense emotion. Likewise, Walker, who experienced significant and sustained deprivation because of both racism and "handicapism", does not seem to be wrestling with the effects of strong, sustained tension or emotion generated by these deprivations. The sources on Turner do not even mention any problems with strong emotion and the management of it. The same is true of Jordan, who was protected by her parents from a good deal of blatant segregation and discrimination. Campanella, the son of a White father and Black mother, who was called names because of his racial characteristics and identification during his early development, seems not to have had any significant problem with these strong emotions and their management.

Of course, at an unconscious level, any number of defense mechanisms may have protected these persons from such emotional reactions and their needs for management. Indeed, the effective use of these mechanisms, like sublimation, may account for their achievement motivation and success.

One thing, however, seems clear, these persons have had very good control over their emotions and their reactions to frustration. All of the seven had potential mobility or transportation problems but learned how to meet their needs for getting around. In every instance, some assistance and/or aid was accepted and used by them to meet their mobility and personal needs.

Understands And Deals With Devaluation

Readiness to deal effectively with racism and "handicapism" would seem to be a necessary skill for Black Americans with disabilities. For these seven, dealing with "handicapism" occupied more time and energy, and the results seemed to be more satisfying. Perhaps, becoming successful requires embracing the knowledge and procedures of White Americans, and if Black Americans with disabilities can do this, race will be subordinated to disability, and disability will require the greater amount of attention. As pointed out by Rushing, disability for a Black American may really open doors that would otherwise remain closed.

Disability may move White persons to view Black persons as individuals more than as members of an oppressed minority and lead them to offer assistance based primarily upon their attention to the disabilities presented by Black persons. If not true for most Blacks, this seems to have been true for these seven successful Black Americans with disabilities. Certainly, the interaction of race and disability and the differential attention it receives from both Whites and Blacks need further inquiry.

Preference For Long-Term Goals

The preference for long-term goals in the lives of these seven persons was evident in their achievements. In the long and distinguished career of Turner, the presence of this factor was highly facilitative of success. Also, the presence of this factor in the life of Jordan certainly helped her to cope with the progressive changes in her disability as they interacted with her responsibilities. Its presence has helped and most likely will continue to help the others in their achievements. In addition, for those with disabilities as teen-agers or as adults, tenacity in movement toward ends had already been developed and contributed to their rehabilitation and other gains. It is a quality that empowers one to move through or, if possible, around frustrating events.

Availability Of Strong Support

Without the help of others, there is little likelihood that these seven persons would have achieved success in their development and employment. They needed help, accepted help, and benefited from help. Help provided not only empathy, warmth, and acceptance but also information, treatment, and the opening of doors for development and employment. Help reinforced their positive self-concepts, facilitated realistic self-appraisal, helped them to establish and realize goals, and assisted them in dealing with frustrations.

Demonstrated Leadership Experience

Leadership takes many forms and has many qualities, and all seven persons, with some variation, were recognized for leadership abilities and provided with leadership experiences.

Demonstrated Community Service

Motivation to help others and to provide services to various communities is evident in the lives of the seven persons.

Special Knowledge

By virtue of successful coping with their disabilities, these seven persons achieved special knowledge which they shared willingly with others. They also shared knowledge gained through their educational and professional achievements. All have become well-rounded in their personal and social functioning.

Discussion

It seems clear that all of the factors in the model have been operant in the lives of these seven successful Black Americans with disabilities. Moreover, it seems that these factors have been inter-related functionally in their lives. In addition, it seems that all of these factors have been realized developmentally as a result of expectations, reinforcements, modeling, and successful problem-solving in thinking, feeling, and behaving related to these factors and their components.

It also seems clear that early childhood development, particularly in the development of a positive self-concept or confidence and the work ethic and moral learnings, has been influential in their lives and in the expression of their achievements.

Religious and/or philosophical frames-of-reference, it seems, helped these seven persons to integrate their disabilities into their personalities, to broaden their values, to recognize their assets, to manage their emotions, and to achieve many types of success. The metaphysical orientations expressed in this study are very noteworthy.

Could these persons have attained employment and other success without any of these factors operating in their lives? It is unlikely that success could have been attained with the absence of these factors.

Can these factors be encouraged and reinforced in others? Yes, they can. In terms of the learning approaches discussed by Brayfield (1968), these successful persons learned effectiveness by accepting and living up to the noble expectations of others, through modeling effective persons, through receiving the support and reinforcement of significant others, and through engaging in problem-identification and problem-solving with effectiveness. Above all, they achieved by having confidence in themselves, most often in terms of being tied in with a power greater than any human power that helped them to reach goals, develop beyond simple survival and well-being, and to achieve not only success, educational and otherwise, but meaning, positive meaning in their lives. Their achievements help us to understand that the study of Black Americans with disabilities ought to be more positive and less negative than it is, and the study of Black Americans with disabilities should have higher ceilings and not be afraid of the loftier possibilities of Blacks not only to survive but transcend the handicapping effects of disability.

Contributions Of The Study To The Literature

In general, the results of this study, as tentative as they may be, support and reinforce the basic themes in the literature regarding emmployment success. For example, the factors that employers want and look for and that helping agents assess, try to develop, and reinforce were operant in the lives of these seven successful Black Americans with disabilities. They were present prior to employment, and they were enhanced after employment.

Also, as the poverty-era literature indicates, the development of these factors seem to be related and inter-related to family background (particularly in the teaching of moral values and the work ethic), positive self-concept, realistic self-appraisal, and success in education and other developmental activities, including relating effectively to peers and authority figures. The results also reinforce the idea that achievement motivation, generated by past successes and the desire for attaining future goals, is very important.

In addition, the findings reinforce the beliefs that there are "late bloomers" and that it is never too late to overcome deficits and accelerate growth and development toward valued goals through education, strong support of all kinds, and adapted assistance. With regard to the importance of having strong support, this finding was particularly evident in the lives of these seven persons, and it generally came in the form of various support combinations. The results definitely reinforce the belief that multiple factors combine and interact to produce success, employment and otherwise, that success profiles and indexes can be developed, and that directive-teaching-type counsel can be facilitative.

As the rehabilitation literature indicates, race may or may not be a significant factor in the realization of employment success. In this study, race was certainly subordinated to disability. For individuals, however, it may be significant in that thoughts and emotions generated by racial experiences may need to be worked through intellectually, emotionally, and behaviorally for the realization of successful employment. Insights into the causes, pervasiveness, and stupidity of racism may be needed, along with the management and/or channeling of strong emotion, and the transcendence of both through the embracing of a strong humanistic orientation rooted, perhaps, in and reinforced by religious or philosophical beliefs.

In some ways, racism and "handicapism" are connected by the common denominator of individual and institutional devaluation of the differences of color and physical ability from the general color and ability norms, but attention to disability differences by support groups and persons is likely to be available, perhaps because disability differences are closer to their experiences since disability respects no race, class, sex, creed, or any other human characteristics. Thus, support persons of the opposite race may feel more comfortable in dealing with something that could happen or has happened to their loved ones, and possibly, to themselves.

For Blacks and other minorities, then, disability may open doors of opportunity and support that would have ordinarily remained closed had not disability interacted with and subordinated race, especially for persons with talent and achievement potential. In addition, disability (at least for a while) may give Blacks freedom from work tasks and ordinary tasks of everyday living and time for development--for reading, for reflection, for education, for developmental interactions, and so forth. Moreover, if disability is acquired prior to the adult years, it may place the person with the disability in a facilitative marginal position and protect him/her from negative expectations and challenges that might be issued by peers as a condition for peer acceptance.

The case of Charles Walker certainly challenges the validity of both diagnostic and prognostic processes and outcomes and the critical period constructs of learning theories. These critical period constructs are also challenged by the cases of Phillip Rushing and Carrie Turner. The results show the need for careful, multiple, reliable, and valid assessments and the interpretations of those assessments for Black Americans. The labeling processes, qualifications, and dangers need much more attention in the literature because too many Black

Americans are rejected for vocational rehabilitation because of severity of disability and lack of cooperation, or they reject vocational rehabilitation because they have little or no faith in it as a viable helping process. How many Walkers and Rushings have been rejected for service or pushed out of service delivery systems because of backgrounds of deprivation and invalid assessment results and interpretations? If there is just one who has been rejected or pushed out for these reasons, the loss is both tragic and criminal. In Walker's case, it took a long time for him to come before professionals who really wanted to know him and not label him. In Rushing's case, his supporters rejected an established rehabilitation training program initially because they feared it would hinder and hurt rather than help him. Both cases illustrated the need for rehabilitationists who know how to organize, coordinate, and use support persons and systems to empower Black persons with disabilities for accelerated development toward meaningful personal-social and vocational goals.

The results of this study reinforce the idea that White persons can be powerful and effective helpers of Blacks with disabilities. Unfortunately, the connecting of Blacks and Whites--as in this study--seems to be a matter of luck, at least it can be explained that way, rather than of design. The issue really turns out to be not whether a helper or support person is White, Black, or whatever, but the kind of helper the person is, his reality orientation, his knowledge, his skills, and his influence. In this study, the seven persons met both effective and ineffective Whites and Blacks in helping interactions and transactions. Some Whites, particularly those with humanistic orientations, were ready to help. This has implications for the selection and employment of persons who will be expected to find and assist Black persons with disabilities. While racial-awareness and cross-cultural training might improve the readiness of some helpers, I honestly believe that it is more pragmatic to be able to say, "We don't tell our staff to be nice and helpful to Black persons with disabilities. We hire persons who are emphatic, warm, genuine, and helpful to Blacks with disabilities and see this as part of their work and orientation toward life."

All of these seven Blacks used rehabilitation agencies and assistance of some type. It is important that agencies have staff who are sensitive to the needs of Black persons as individuals.

The habilitation and/or vocational rehabilitation of Blacks with disabilities may, as the poverty-era literature indicates, require long-range goals and sufficient resources, both time and money and also supports, for their realization. The success of the subjects related to goals and resources. It was because of the goals and support along with their talent and tenacity that they are where they are today. This suggests that factors that are operant in the lives of these seven successful Black Americans with disabilities need also to be operant in the rehabilitation rules, agencies, processes, and persons that serve minority persons with disabilities.

In terms of the relevance of this study and its findings to the popular literature, the popular literature was a very valuable source for this research. Indeed, without it, the profiles and analyses could not have been completed. Moreover, the popular literature that was directed toward Black audiences was not only more abundant but also more valuable for this study and for reaching Black Americans than the literature directed toward the White or general audiences. More specifically, the literature directed toward Black people has potential for facilitating improved understanding, acceptance, and appreciation of Blacks with disabilities by Blacks. More importantly, it has potential for providing Blacks with insights into coping possibilities, for facilitating identification with Blacks with disabilities who are successful, and for connecting persons with disabilities with appropriate resources. Accordingly, it can facilitate casefinding and acceptance of help.

While some of these same points can be applied to the popular literature on persons with disabilities written by Whites for general audiences, the main point is that more and better literature needs to be written, disseminated, and used to reach and help Black Americans with disabilities. Indeed, in this study, important characteristics manifest in valued persons, irrespective of race, were modeled by several of the seven persons who were profiled.

At the same time, I do not want to give the impression that the popular literature for Blacks is all facilitative. Clearly, it is not. Too often, Black writers gloss over disability and subordinate it to race, much to the disadvantage of persons who have a strong need to know about disability and the availability of models of coping effectiveness. In addition, if the health and rehabilitation of Black Americans are important, then the popular literature can do more to promote health and rehabilitation than it has been doing. Indeed, the factors used in this study can be helpful to writers in finding, organizing, and writing about the success of Black Americans with disabilities. Many of the temporarily able-bodied Blacks who will experience disability sooner or later can benefit from better information and writing.

Another point needs to be made on the literature concerning Black Americans with disabilities: it is poorly indexed. The building of my data pool took hundreds of hours because appropriate indexes do not exist. Even the otherwise excellent publications of Ebony, Jet, and Essence lack indexes of anything, and this shortcoming frustrates the finding of material. If the publishers of these magazines do not see fit to index articles and topics, then someone should make up for this void.

The results of this study also support the notion that disability labels or diagnoses tell us little or nothing about the likelihood of successful adaptation and employment success among persons with disabilities. In terms of success potentials, understanding the person is more important than simply knowing the medical label for the impairment. Their experiences, particularly from a longitudinal perspective, need to be understood and appreciated. What does the use of a disability category really tell us about changing experiences of an individual with a disability and the world? What does it tell us about personality changes as time passes? People living with disabilities are lives in process, and we need to understand the processes. Yes, there are doors that are shut sometimes rather rigidly by disabilities, but there are also doors that are opened by talent and personality factors, and we need to understand these phenomena better.

In this study, the roles of strong support persons, processes and religion as positive forces were more strongly emphasized than in most of the studies and reports in the literature. In this study, it became increasingly clear that behind and within the individual are notions of helpfulness and support and actual support and organizing principles that give life meaning. Indeed, it is really difficult to imagine how the seven persons would have achieved success without strong support figures and their helping interactions and transactions, including the rules that guide them in their helping roles and relationships. What predisposes persons to offer help? Does it just happen? Or is it part of one's lifestyle? How does one outside of the helping professions acquire the knowledge and skills to offer realistic help? What influences the sustaining of long-term assistance? And for those in the helping professions, what moves them to be effective in cross-racial and cross-cultural situations? Moreover, among the effects on those receiving help was an increase in their desire to help others like themselves. Could this have been background dynamics in the lives of those who offered and provided them help? This study suggests that the psychology of helpfulness needs greater attention in the literature.

Likewise, religion as a positive and potent factor in the development of disabled persons was emphasized in this study moreso than in other studies. The new found integration experienced by these persons was frequently accompanied by greater religious strength and greater love for their fellowmen. In this regard, the results of this study suggest that we need to know what is healthy and positive in persons with disabilities. Certainly, in these seven persons, there was much that was and is healthy and positive and that empowered them to survive and adapt and to grow under the most trying circumstances. Indeed, their resiliency and fortitude is awe-inspiring and can fill the average person with humility. Their lives are powerful testimonies of capacities to overcome the most shattering circumstance. Their lives are also strong testimonies about the fact that it is not the disability but the interpretation of the disability that is significant in the adaptation success of the person with a disability. Religion and other positive emotions--love, hope, joy, striving, and insightful experiences in the lives of disabled persons--need greater attention in the popular literature. They also need attention in the social science literature. Surely, if literary works discuss and explore these positive emotions, social and behavioral science ought to study them also. Therefore, one of the contributions of this study to the literature is the focus on positive experiences, particularly in efforts to transcend disabilities, and the intrinsic values of the experiences of individuals. When this focus is ignored or placed in the background and when labeling dominates the attention and the foreground, the progression of personality growth and the integration of disabilities unto lives with greater meaning are likely to be missed or glossed over.

Some Implications Of This Study

The results of this exploratory study have some implications for further research and for professional practice in several areas--parent training, education, rehabilitation, religion, and job placement and employers. The study also has some implications for the Howard University Project on minority persons with disabilities.

Further Research

The results of this study suggest that the method employed for studying critical factors related to the employment success of Black Americans with disabilities is promising. Further profiling and analyses are needed, however, to strengthen confidence in the factors and the method. This includes the need for reliability and validity assessments. Attention needs to be given to how these factors relate to successful coping with employment and other challenges from a longitudinal perspective.

Attention also needs to be given to the development of scales related to each of the factors so that quantitative analyses can be used to examine possible quantitative relationships and differences between and among persons grouped in different ways, e.g., sex, occupations, very strong support versus less strong support, and so on. Quantification of the factors also invites studies of concurrent and predictive validities.

My intention is to continue profiling the persons I have in my data base and analyzing the profiles for commonalities and differences while I move toward the development of procedures for quantitative analyses.

Practice

It would seem that various practitioners should know about and can benefit from the use of these factors in the development of services. For example, efforts to develop these factors in clients through practice would not only be worthwhile in terms of service delivery but also generate research questions related to the most effective ways for increasing the potency and interaction of such factors for various forms of success. Using a scholarly practitioner approach, for example, the following questions could be examined: How do expectations and what kind of expectations influence the increase in the potency of the various factors? How about reinforcements, modeling, and problem solving? Are directive approaches more viable than nondirectve approaches, or is a combination of both the better choice? What are the most productive intervention points and times?

Parent Training. Because early childhood development is important, it would seem that the inclusion of discussions about these factors in parent training would be worthwhile. Activities designed to help parents assist children in acquiring and using these factors in relationship to meeting developmental challenges would also seem worthwhile. The importance of parents ending the isolation of children through broadening contacts and travel could be utilized and reinforced in teaching the interdependency of these factors in the facilitation of development. Also, parents might be helped to explore play activities and relationships in promoting the development of these factors in their children.

Education. The approach employed in this study can also be employed in education for studying persons and their development. The factors can also be used in the setting of goals, designing of learning experiences, and the assessment of learning outcomes. In addition, the inclusion of these factors in teacher education, teacher observation, and student teaching would seem to be worthwhile.

Rehabilitation. These factors can be used in assessing the readiness of persons for rehabilitation, the designing of rehabilitation plans and their monitoring, the personal and work adjustment training of clients, and in preparing and reinforcing the readiness of clients for placement. Understanding the results of this study can help counselors to analyze the interdependence of the various factors in the lives of their clients, including the availability of support persons and systems, and relate this understanding to the help they provide clients.

Because the study suggests that the concept of critical learning periods may be less critical than is believed, counselors should lean towards reality testing of readiness to learn through actual experiences more so than the results of psychological tests and the acceptance of theoretical notions about critical learning periods.

Also, because the study reinforces the importance of education in the development of the potential of Black clients, including long-term education, rehabilitation programs should emphasize the importance of education in the development of Black clients. There are late-bloomers in every caseload, and counselors and supervisors should be alert to their presence and the possession of these factors examined in this study and their potential for further development.

Finally, since this study reinforces the value and importance of rehabilitation in the development and ultimate success of Black Americans with disabilities, rehabilitationists should seek to improve the access of Blacks to rehabilitation programs and their development in such programs.

Job Placement And Employers. Work is extremely important to persons with disabilities. Job placement personnel and employers can benefit from understanding this and how persons with disabilities can be reasonably accommodated. Employers, in particular, need to understand the values of hiring persons with disabilities to meet their work requirements and of the critical roles they play in facilitating the full development of persons with disabilities.

Religion. Because this study reinforces the belief in religion as an integrating and motivating force for persons with disabilities, religious groups should be encouraged to review their messages and practices regarding persons with disabilities and use messages and approaches which facilitate not only the integration of disability but also the meaningful transcendence of disabling conditions. Moreover, religious organizations need to understand that the learnings from the faith and beliefs of persons with disabilities can do much to strengthen faith in general and contribute to sermons and programs of inspiration. Of course, religious groups should be encouraged to remove architectural, attitudinal, and organizational barriers to the participation of persons with disabilities in their religious services and programs.

The Howard University Project

Here are some suggestions which might prove useful to the Howard University Project:

- Build data bases on successful minority persons, analyze the data, and disseminate the findings.
- Build longitudinal studies on minority person with disabilities for a fuller understanding of their development and determine how such information can be used to facilitate the improved and continuing development of persons with disabilities.
- Build modeling/mentoring and networking programs for the disabled to facilitate and reinforce achievement motivation.
- Design and provide continuing education courses and consultation regarding the critical factors related to employment success that were investigated in this study.
- Encourage and support research similar to this research on other minority groups.
- Develop and disseminate instructional materials related to the critical factors for children, parents, counselors, religious institutions, and other helping persons and groups.

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PUBLIC/PRIVATE PARTNERSHIP TO FACILITATE CAREER SUCCESS FOR MINORITY PERSONS WITH DISABILITIES

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Abstract

This paper provides an overview of benefits which may be derived from the collaboration of agencies and organizations in the public and private sector. The presentor has had the unique opportunity of marshalling resources from the correctional system and the corporate world in order to successfully rehabilitate persons with disabilities who have had encounters with the law. This paper includes concrete examples of the manner in which advocacy, networking, the use of individual analysis and monitoring systems, and other techniques may be implemented as a means of facilitating positive employment outcomes for persons with disabilities.

It will be my task in this brief paper to dramatize the need for a systemic, if not scientific approach in reconciling and mitigating problems associated with the preparation, acquisition and retention of minority persons with disabilities in the world of work.

My abled colleagues have researched and published many books, articles and dissertations relating to the disproportionate number of persons with disabilities in the minority population. I have the understanding that the incidence of disability in the Black population is twice as high as it is among any other ethnic group.

As an employee of a major corporation, New Jersey Bell, headquartered in Newark, New Jersey, I have gained a tremendous amount of experience both traditionally and non-traditionally in promoting a "readiness" posture for hiring and retaining minorities from urban settings who have been historically labeled "deprived", "disadvantaged", "unskilled" and more. My experience working thirty years in the New Jersey Correctional System was a great contributor to my approach to a very difficult issue of securing opportunities for work, especially for those individuals who also were burdened with criminal records.

Relying on empirical knowledge, hard work and commitment, I developed a plan of action with the support of others which utilized the following strategies:

Advocacy - Pursue aggressively every opportunity to orientate and solicit support from community groups, elected officials, agencies and public institutions in fostering a meaningful and purposeful hiring process for those persons who, for many reasons, have been denied job opportunities.

Networking - Establish a system involving governmental agencies, (e.g., Department of Human Services, Department of Social Security, Department of Labor, Department of Community Affairs, and Department of Transportation) to ensure that funds are set aside for training persons with disabilities and providing barrier-free environments for persons with handicapping conditions.

Individual Analysis - Develop a profile on potential job applicants with disabilities to ascertain their special needs. Specialized collaboration is required to place a person with a disability with a "mastered" skill in a highly motivated work force.

Monitor System - Work closely with employers and supervisors to reinforce legal requirements and commitments in hiring persons with disabilities.

Home Visitations - Encourage family support for job applicants in dispelling misinformation and guilt associated with having members with disabilities. In many cases the home environment is a strong indicator on whether a person with a disability will succeed or fail, especially when work experience is negligible or non-existent by other family members.

Religious Contacts - Coordinate programs which will involve religious institutions amplifying the need for faith, self-confidence and pride, often not present with job applicants with limited job expectations. The Black church has the potential of serving as as excellent outreach system.

Sensitivity - Provide training and orientation for people with disabilities and their co-workers in order that positive communication can be instituted to enhance the work performance of all involved.

Awareness - Be cognizant that social problems (e.g., drug misuse, alcoholism, depression, etc.) experienced by the general public are often exacerbated when related to the disadvantaged and to persons with disabilities. It has been documented that the aforementioned social problems are contributors to job related failures.

In conclusion, the above "readiness" posture has proven to be a key factor in an amazing phenomenon that is taking place in a Juvenile Correctional Institution for which I am serving as Chairman of the Board of Trustees. In New Jersey, inmate work release programs were looked upon unfavorably by most employers. The institution provided vocational training, job orientation and counseling for inmates who demonstrated that they were willing to work, and consequently, change their deviant styles. As a result, 25% of the inmate population are working off grounds earning competitive salaries.

The area where the institution is located has a depleted manpower source. In fact, the rate of employed inmates would be much higher if we had more qualified persons (less severe criminal charges) to fill the available slots. A combination of all of the above "readiness" strategies is producing a successful "new beginnning" for individuals who never had expectations of a meaningful job experience.

I had the privilege of reading a journal entitled, Equal to the Challenge, edited by Dr. Sylvia Walker et. al., which I considered as an excellent resource in dealing with minority persons with disabilities. My only regret is that this valuable resource was not available when I started my career as a practitioner on the "rough side of the mountain" dealing with offenders, exoffenders, drug users, persons with mental defects, etc.

I believe that there is a "gold mine" of productivity among persons with disabilities. Hopefully, their life expectations can be realized by meaningful employment, independence, and more positive attitudes by an enlightened public.

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CRITICAL FACTORS IN THE EMPLOYMENT SUCCESSES OF BLACK AMERICANS WITH DISABILITIES

SESSION A: SUMMARY

Recorder: Mrs. Elaine Williams
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Dr. Wilson set the tone of the session by presenting his paper titled, "Critical Factors of Successful Black Adaptation and Development," and asking the questions, (1) What might be the meaning of the critical factors? (2) Are there ways that we can influence our co-workers and colleagues? (3) What are some recommendations?

Having spent years in his profession studying the problems and negative aspects of disability (whether physical, intellectual or emotional), he chose to identify the positive and successful aspects. We've been socialized in the language of wrongness and therefore, he defines rehabilitation as the restoration of hope. Dr. Wilson discussed his research and factors related to persons emerging from the ghetto as well as those who did not (not all Blacks are from the ghetto). In total he has identified over 300 Black persons with disabilities. During the initial stages of this research, he reviewed the literature from a time/life perspective.

In identifying over 300 Black persons who have transcended their disabilities, he found the most significant information on Blacks were in Black publications, which are designed to attract Black readers (i.e. Encore, Ebony, Sepia, Essence). Dr. Wilson focused on 9 critical factors of successful adaption and development; several are presented below.

1. Family Background - family intactness; having a stable environment

allowing reinforcement of values and where at least one parent is loving and involved in moral teaching and work ethic. Most of the people he identified in his research began working at an early age. On the other hand, there is the street culture. Here there is a lack of guidance; child rebels against authority; develops into a manchild/womanchild. These people are engaged in eternal adolescence and scheming; being cool becomes a value. Usually if they stay alive until 35, they begin to turn around--realizing the value of work. Having a disability offers a protective hedge against getting involved with the street culture. The nature of the particular disability does not allow the individual to be an active part of this group. The person with disabilities is then more likely to reflect on other values and thus is more likely to concentrate on school and academic tasks which lead to better grades and successful experiences.

2. Positive Self Concept - In most people, confidence is built upon success. The recognition of talent and having it reinforced is important in saying "I can". This is a realistic assessment of self which comes about through trial reality testing. Shirley Jordan, a political speaker and long term patient of Multiple Sclerosis (who died in 1985) said, " if you rely on what people tell you, you are less likely to find out for yourself through testing."

3. Re-evaluation - Understanding and dealing with racism. What creates difficulties is not a lack of skills; but communication - relating to authority figures, co-workers, etc. It is essential for the successful individual to rise above negative situations. Isaac Hopkins made the point (relative to re-evaluation) that it is essential to take a disadvantage, or a negative situation, and turn it into an advantage or a positive one.

In summary, Dr. Wilson identified the following factors which also contribute to success: realistic self appraisal, the use of long range goals, availability of strong support person, successful leadership experience, and demonstrated community service. Dr. Wilson stated that there are multiple factors involved in the success of those individuals highlighted in his research, and all these factors are interdependent.

Isaac Hopkins' presentation focused on support of Black inmates with disabilities through advocacy. He noted that 48% of inmates in prison are Black. Through various job readiness programs that he is involved in, he assists Black and Hispanic inmates in gaining employment skills and eventually jobs. He has a strong belief in soliciting support from the private sector in order to give his clients the opportunity to prove their ability.

Mary Wells' comments on these issues involved the importance of communication and the manner in which information is received by lay people in the community including consumers. She suggests that through the simplification of language, information could be disseminated in the community by ministers and concerned community members. In this way larger audiences may be informed and may take greater advantage of available opportunities. She also added that Faith, Hope and Charity, when carefully applied by counselors, opens the door to wisdom, sheds light, and helps people utilize the talents they have. Ms. Wells shares personal work experiences with professionals in a Christian environment and believes that people everywhere need to treat people like they would like to be treated themselves.

SECTION III.

BUILDING BRIDGES TO EDUCATION

EFFECTIVE APPROACHES TO THE EDUCATION OF BLACK AMERICANS WITH DISABILITIES

SESSION B

PRESENTER:	DR. MARTHA LENTZ WALKER PROFESSOR KENT STATE UNIVERSITY
PANELISTS:	DR. GLORIA F. WOLINSKY PROFESSOR HUNTER COLLEGE, CUNY
	MS. BARBARA HARDAWAY FACULTY MEMBER GALLAUDET UNIVERSITY
	MRS. ETHEL BRIGGS ADULT SERVICES SPECIALIST NATIONAL COUNCIL ON THE HANDICAPPED

EFFECTIVE APPROACHES TO THE EDUCATION OF BLACK AMERICANS WITH DISABILITIES

MARTHA LENTZ WALKER

Professor
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Abstract

This paper gives a critical review of effective approaches to the education of Black Americans with disabilities. Recent studies show a positive correlation between low socioeconomic status and limited education and disability. Studies have also shown that Blacks in general and Black Americans with disabilities in particular have been miseducated. Consequently, the author suggest a number of practical strategies for effectively educating Black Americans with disabilities. These include: educating the parents; change of behaviors and attitudes by the teachers of children with disabilities; and the need for strong leadership in schools which serve the target populations. The author concludes her paper by noting that education is an important status equalizer for both Blacks and persons with disabilities.

The title of this position paper presumes consensus that, in my opinion, is altogether lacking. As Americans we do not agree on, nor do we have adequate knowledge to prescribe effective approaches to the education of any American, much less citizens who are dually devalued in our society. A substantial part of this predicament is due to the lack of a shared philosophy of education in America, resulting in diverse curricula ranging from liberal arts to vocational education. Finally, the difficulty of any investigation into this effective education for Black Americans with disabilities is compounded by the descriptors "black" and "disability." Which is primary? Which demographic variable accounts for the greatest variance in education? I can tell you, with confidence, that there is very limited research to help us understand the interaction of race and disability in education.

The best a researcher can do at this point is to deduce and extrapolate from the best available research in education of children and youth in America. A grafting from findings that pertain either to being Black or having a disability has become the task of this review. It is curious and instructive that these areas of research are so disconnected, leaving the interaction of race and disability virgin research territory.

Education as a Risk Factor in Disability

While there is disagreement as to the effect of educational attainment on occupational advancement for Black Americans (Ogbu, 1978), the census figures can be construed as evidence that education, or the lack of it, is a risk factor for disability. Bowe's (1985) statistical report on Black adults with disabilities points out the probability that lower levels of education lead to unskilled jobs and to poverty. (In Bowe's study, $8,000 per year was considered the "poverty line" in 1980.) According to Bowe, the average Black person with a disability aged 16-24 was found to have less than a high school level of preparation; only one Black with a disability of working age in every 40 is a college graduate. One out of every four Blacks with disabilities aged 16-24 never completed an eighth grade education. Although education may not be a bridge for Blacks to the same occupational roles and higher economic status held by Whites, the lack of an education clearly increases the risk of degenerative disease or accident in the workplace. It is apparent from Bowe's study that a job ceiling and a lack of education combine to put Blacks at risk for acquired disability.

Being Black and poor also predisposes Black children to developmental or congenital disability. Bowe's analysis shows that 78% of Blacks with disabilities and 79% of Blacks without disabilities live in cities, most in central cities. Although birth defect monitoring is not a priority within health agencies, teratogenic agents are more likely to be found in industrialized settings. Low-level brain damage has been undeniably linked to lead poisoning, an exposure commonly found in the older plumbing of inner city housing. Children with high lead content in baby teeth scored lowest on intelligence tests and teacher ratings of cooperation and behavior. As the level of lead found in the mother's umbilical cord reaches six micrograms per liter, the risk for malformations doubles (Norwood, 1968). Black infants and children from poor families are at risk for developmental disabilities, and if their parents have a limited education, these children lose the chance of escaping an environment that can stunt their development even before they are born.

The census data presented by Bowe underscore the importance of education as preventive medicine, decreasing the chances of developmental disability, degenerative conditions, and work-related injury. Education is inversely correlated with poverty, for the poverty rate increases as the level of attainment of the head of the household decreases (U.S. Commission on Civil Rights, 1983.) The potency of education is clear, but what kind of education will we accept as the American standard?

Education as Status Determinant

Ogbu (1978) traces the history of black education as reflective of the way Blacks' position in society was defined relative to Whites. Blacks were considered inferior to Whites in intelligence and were not seen as being able to benefit from formal education until about 1861 (p. 105). In the period immediately after the Civil War, Blacks were largely taught by missionaries, who took a neutral course, emphasizing moral and religious training, because they were not sure Blacks would have access to the same roles performed by Whites. When the Fourteenth Amendment was passed in 1866, the orientation of education turned toward enabling Blacks to attain equal status with Whites in social, economic, and political realms (p. 108). The Freedmen's Bureau established schools for Blacks through the South, instituting a curriculum that was classical in purpose. By 1900 black education had been changed once more, this time to produce a person who adapted well to the tenant system or industrial occupations. The shift back to academic studies in the period 1931-1953 is seen by Pinkney (1984) as further evidence that education for Blacks was not intended to elevate Blacks, for the nation's industrial development now demanded more training in industrial skills for rewarding jobs, now sought by Whites. Black education continually changed in accordance with the social and technoeconomic status of Blacks, thereby being used to prepare Blacks for whatever positions were assigned to them in a "caste" system. The Civil Rights Act of 1964 was aimed at increasing the social and technoeconomic participation of Blacks to an equal footing with Whites, and it became necessary to once again redesign education. School integration and compensatory education followed, efforts Ogbu describes as changing Blacks so that they would perform like middle-class Whites within the existing education system.

The controversy about "miseducation" of Black children continues in the 80's; the American education system is accused of attempting to socialize Black children into accepting the history, culture, and value system of Anglo-Americans (Hale-Benson, 1986). Objective descriptions of Black children's development are beginning to appear (Jones, 1982) which support the contention that the traditional educational process puts Black children at risk, because they are being asked to master two cultures. How do we know the American educational system has not been effective in educating Black children? Hale-Benson (1986) provides some vital signs:

- 28 percent of Black high school children drop out before graduation; this figure approaches 50 percent in some cities
- average achievement on standardized tests for Blacks is two or more grade levels below the average for Whites
- although Blacks comprise slightly more than 10 percent of the population, they make up 40 percent of the educable mentally retarded population
- one-third of Black students enrolled in community colleges are in programs that do not necessarily give credits toward a baccalaureate degree (p. 177)

In his "scorecard on black progress" Farley (1984) points out the distance to be traveled. Black men are still twice as likely as White men to be out of work; public schools in New York, Chicago, Los Angeles, Philadelphia, and Washington were as racially segregated in 1980 as in 1960 (p. 206). Farley also calls attention to the economically polarized Black community. Young Blacks who have completed college have moved into a more prosperous way of life, while many other Blacks are trapped in city ghettos where schools are poor and economic conditions have radically worsened (p. 10). With higher education seen as key predictor of occupational attainment, the nature of postsecondary education becomes even more important. In 1979 nearly 46 percent of all Black college students were in community colleges, where the associate degree often became the end of their education and the beginning of marginal occupational careers (Pinkney, 1984). Nine-tenths of all doctoral degrees between the years 1973-76 were awarded to White students (Lehner, 1980). Earned doctorates by Blacks were concentrated in education, arts, and humanities, fields which are commonly viewed as being on a lower status in American society. The reduction in student financial assistance for higher education has and will affect the future of Black students, as 80 percent of all Black students enrolled in postsecondary institutions receive some form of federal assistance (Cole, 1983, p. 30). Since the latter part of the seventies, minority enrollment in graduate and professional schools has been declining (U.S. Office of Civil Rights, 1984).

What we know, it seems, is that traditional American education is not working for Black children and youth; it has not fulfilled the promise, so well stated by W.E.B. Dubois, to be the "lever to uplift a people." (Dubois, 1903) We must start with this fact before proceeding to what we know about education for Black children and youth with disabilities.

Ogbu (1978) suggests that the reason for lower Black performance lies in the way schools and their classrooms operate "subtle devices" that:

> encourage Black students to fail academically, to drop out of school earlier than White students, and to enter post-school society with just so much education as the dominant group considers appropriate for their traditional social and technoeconomic roles." (p. 132)

Ogbu targets the devices by which schools encourage Black children to fail, including (1) teacher attitudes and expectations; (2) testing, misclassification, and ability grouping; (3) classroom dynamics in status reinforcement.

These devices, when coupled with the isolation and discrimination experienced by persons with disabilities (Jenkins and Amos, 1983), dictate the direction education must take if it is to offer the promised bridge to occupational attainment.

The temper of recent times has reduced the probability that Black children and youth will reach their educational potential within the American education system. Trends which affect both Blacks and youth with disabilities in higher education include higher admissions standards, combined with a reluctance to provide developmental education (Stikes, 1986a). The report of the National Commission on Excellence in Education was published in 1983 (U.S. Dept. of Education, 1983) and attention turned from pluralism (Howe, 1979) to raising educational standards through local control and "direct teaching" (Whitmore and Maker, 1985, p. 13). Front-page headlines proclaim American youths as lacking the literacy skills to succeed, and the subtitles identify Blacks as performing "significantly below" Whites on every test of literacy (Brazaitis, 1986). Many universities are moving away from open admissions policies on the grounds of striving for "excellence", while shunting less prepared students to commmunity colleges or regional campuses. Often these institutions are less staffed and equipped than better high schools (Pinkney, 1984, p. 145) and may be in danger of becoming institutions for the disadvantaged of society. Both Black and students with disabilites had gained access to integrated schooling by the late 70's. These gains may be temporary, if the battle [illegible]st educational mediocrity is interpreted as the exclusion of minorities from programs of quality education.

Education and a Hierarchy of Handicaps

A search in the media for rehabilitation and disability information (related to disability) and for reports from disability advocacy groups proves futile if one is looking for the presence or perspective of a Black citizen with a disability. Although census statistics indicate disability is twice as common among Black adults in this country, this population is not evident. A Black graduate student with a disability provided the most plausible explanation for this disappearing act. Glenn Stikes (1986b) explained that Blacks do not see themselves as disabled; they identify primarily with being Black. In a hierarchy of handicaps within our society, being Black is the more visible and devalued. Belgrave (1985) reported a finding that supports this subordination of disability. Her research also revealed that nondisabled White individuals were more accepting of a Black with a disability than of a Black without a disability.

Although the attitudinal barriers for persons with disabilities may be less severe than those of Black Americans, we can combine known problems for both groups and surmise that the educational problems of being Black and having a disability are magnifications of being either one or the other.

Both Blacks and individuals with disabilities report reduced teacher expectations:

> The disabled child must demonstrate exceptionally high abilities in order to gain recognition and cooperation, especially from teachers. Because of their lower expectations of the disabled child's potential, teachers are less likely to provide the same encouragement or offer the same exposure to enrichment programs that are routinely available to nondisabled children. The disabled individual may be segregated even within the regular classroom; such practices reduce peer interactions and development of social skills. Later the disabled student may be exposed to a continuing stream of negative responses: one cannot be a mechanical engineer if one walks with braces and crutches, cannot teach if one is blind, cannot be a doctor if one is deaf, and so on and on. (Stearner, 1984, p. 15)

> Black alumni (of the Massachusetts Institute of Technology) said relationships between Black students and White professors were often characterized by poor or inadequate support, occasionally some blatant discriminatory behavior, and, far too frequently, by that most invidious of all racist attitudes -- low expectations of academic performance based on skin color. (McBay, 1986, p.8)

Unfortunately, students tend to learn as little -- or as much -- as their teachers expect. Recently reported research by the Department of Education showed that the observable effects of lessened teacher expectations are: being seated farther from the teacher; receiving less direct instruction; having fewer opportunities to learn new material; and being asked to do less work (U.S. Dept. of Education, 1986, p. 32).

The importance of nonverbal behavior in student-teacher interactions has been closely studied by social psychologists (Feldman, 1986). The transmission of teacher expectations has continued to be studied and to be shown as causal with respect to the intellectual functioning of pupils (Feldman, 1986, p.129).

Perhaps the communication of expectations accounts for the benefits found in educating Black students in Black colleges (Hale-Benson, 1986). Teachers who serve as role models for minorities in a distinctive educational setting are not a complete answer to combating lowered teacher expectations. Black faculty at an urban college were criticized for "deserting the collectivity" -- for not caring about their people (Weis, 1985, p. 80). Black faculty reported being disappointed with the quality of the Black students, particularly the low level of academic skills. That faculty responded by relying increasingly on objective examinations which required little or no writing (Weis, 1985, p. 89). A male Black faculty member charged that Black male students expected him to "give them a break" and to slide them through. This particular faculty member responded by stating that the most obvious answer to lowered or negative expectations of minorities and students with disabilities -- that of providing teachers who have experienced the same stigma -- is neither possible nor fail-safe.

The multiple effects of minority group membership and disability may be present in the data prepared on public school and special education enrollment. While figures prepare us to expect twice the number of minority children being served in special education, Whites are shown as comprising 70 percent of the students receiving special education services (Table 1). What is even more interesting is the distribution of learning disability between the races (74 percent Whites; 25 percent Blacks). Blacks, on the other hand, constituted 44 percent of the educable mentally retarded group, with Whites making up the other 55 percent of that diagnostic category. This increased incidence of a less severe disability among Whites was also shown in a national study of the frequency and distribution of disability among Blacks (Walker, et al, 1986, p. 35). Thirty-two percent of the total White population was diagnosed learning

TABLE I.

RACIAL/ETHNIC COMPOSITION OF TOTAL PUBLIC SCHOOL ENROLLMENT AND SPECIAL EDUCATION ENROLLMENT FALL 1980

		Students receiving special education							
			Judgemental classifications						
Racial/ethnic classification	Total public school enrollment	Total	Total	Specific learning disabled	Speech impaired	Educable mentally retarded	Trainable mentally retarded	Seriously emotionally disturbed	All other handicapping conditions
Total number (in thousands)	39,833	3,222	2,999	1,261	904	556	95	183	223
White, not of Hispanic origin	29,180	NA	2,113	934	668	309	59	123	NA
Minority	10,652	NA	886	327	216	247	36	60	NA
Black, not of Hispanic origin ..	6,416	NA	625	201	137	215	26	46	NA
Hispanic	3,179	NA	207	102	60	25	7	12	NA
American Indian or Alaskan Native	306	NA	26	12	6	5	1	1	NA
Asian or Pacific Islander	749	NA	28	11	14	2	1	1	NA
Total percent	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
White, not of Hispanic origin	73.3	NA	70.5	74.1	76.1	56.5	62.6	NA	
Minority	26.7	NA	29.5	25.9	23.9	44.5	37.6	32.9	NA
Black, not of Hispanic origin ..	16.1	NA	20.8	16.0	15.1	38.7	27.6	25.2	NA
Hispanic	8.0	NA	6.9	8.1	6.6	4.5	7.6	8.5	NA
American Indian or Alaskan Native	0.8	NA	0.9	1.0	0.7	0.9	0.9	0.6	NA
Asian or Pacific Islander	1.9	NA	0.9	0.8	1.5	0.4	1.2	0.4	NA

NA: Not available

SOURCE: Office for Civil Rights, U.S. Department of Education, 1980 Elementary and Secondary Schools Civil Rights Survey National Summaries, table 1.

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disabled, while only 2 percent of the total Black population was diagnosed learning disabled and 32 percent of the Black population was diagnosed mentally retarded. A possible explanation of these findings is that schools tend to attribute milder learning problems to racial differences, thus fewer Blacks are diagnosed as learning disabled and served by special educators. Likewise, as adults, Blacks may be served by rehabilitation only if the disability is severe enough to override stereotypes of Black performance.

Collins and Camblin (1982) called attention to the disproportionate number of Black children in special education programs, urging Black parents to be aware of their children's potential exclusion from other types of "more favored" educational groupings. Nearly 40 percent of all White students enrolled in special education programs are in classes for the learning disabled, making that program the largest in special education (p. 19).

The implications of being diagnosed as having a specific learning disability versus being educable mentally retarded are serious. The status attainment models introduced by sociologists have produced a systematic procedure for describing the process by which individuals attain career status (Biller, 1987). The best predictor of adult success within our existing economic framework is mathematics scores, and tests given as early as the sixth grade were found to be reliable predictors of educational attainment, occupational status and earnings (Jenks, Crouse, & Mueser, 1983). If Black and/or children with disabilities experience difficulty in mathematics, specialized help would be offered a learning disabled child, while the diagnosis of educable mentally retarded would relegate the child to non-academic programming. Although the expansion of special education services in the 60's was society's response to the civil rights of people who are retarded, large numbers of culturally different children have been labeled mildly retarded, inappropriately classified, and their

Russell suggests that a person with a disability should not settle for less than a liberal education; DuBois argued for the same philosophy. I contend that a Black person with a disability has two status strikes to overcome, and that a liberal education is essential for full participation in American society If this philosophy can be translated into a goal, even a blueprint, then our direction will not be lost in these precarious times.

Practical Strategies for Getting the Education Needed

Two years ago Dr. William Bennett, Secretary of Education unveiled a report called What Works: Research About Teaching and Learning (U.S. Dept. of Education, 1986). It stands as a consumer's guide to elementary and secondary education. Parents of Black children and youth with disabilities would be well served by having a personal copy of this document; it will provide a means to evaluate the curriculum, teachers, and methods in the schools their children attend. There is nothing specific there about Black or students with disabilities, but the pedagogical research is applicable.

Parent Education. The critical components for insuring access to liberal, first-rate education for Black children and youth with disabilities can be extrapolated from scattered research and biographical sketches of such persons who have "made it." One such component, not included in What Works, is training the parents of very young children with disabilities to be effective case managers and advocates for their children. At the earliest moment, parents of children with disabilities should be connected to parent organizations which provide support and instruction in self-help and advocacy (Young, 1986). As the child moves through the educational system, weathering transitions, the parents of the child will need to be on guard against exaggerated deference of teachers to the medical implications of the child's disability (Hobbs, et al, 1984).

futures have been sealed with respect to educational attainment (Manni, 1984).

Our American education system has wandered, sometimes widely, in search of a shared philosophy. The importance of education seems never to have been seriously questioned, but the nature of that education has never been decided. It is instructive to compare the dates of two statements--one of a famous Black educator, the other of a noted teacher with a disability.

W.E.B. DuBois wrote in 1903 his view of the mission of "true education": "I insist that the object of all true education is not to make men carpenters, it is to make carpenters men." DuBois went on to say:

> If we make money the object of man-training, we shall develop money-makers but not necessarily men; if we make technical skill the object of education, we may possess artisans but not, in nature, men. Men we shall have only as we make manhood the object of the work of the schools -- intelligence, broad sympathy, knowledge of the world that was and is, and of the relation of men to it -- this is the curriculum of that Higher Education which must underlie true life. (p.33)

In an excellent Distinguished Lecturer Series held at Columbia University, Professor Robert Russell, who is blind, spoke of the importance of a liberal education for people with handicapping conditions.

> "The first aim of liberal education is the leading forth - it is an invitation, a challenge, to a kind of wrestling match with reality, a full engagement of personality... This kind of education, the liberal, is more important for the handicapped than for the "ordinary" person. I use myself as an example... My problems have nothing to do with whether I am good at my job. My main problem, and I think it is peculiarly central for every handicapped person, is to convince the waitress and the college principal that we are human, that we are neither below or above that classification, neither sub nor super...My central and continual job is to calm those fears in the other, whether an employer or a waitress, that spring from his or her sense that I am an oddity. I have got to show others that I understand and care very much about the same basic concerns that fascinate and perplex all sensitive human beings. A liberal education stimulates precisely the kind of understanding and kind of caring that holds the possibility of uniting all human beings. This sense of the world communicates itself to other people and puts them at ease in one's presence. They no longer think of one as sub or super but simply as a person. (Russell, 1979, p. 59)

They will need the ego strength to continue to make suggestions to teachers in the face of teachers' attitudes that parents do not have enough expertise to understand such matters (Pinkney, 1984, p. 134). The parents will be the first line of offense in persuading schools that what is offered for children and youth without disabilities must be offered for students with disabilities. If the parents are not advocates of access, the child will simply not be afforded opportunities for physical education, after-school activities, the sort of contact from which friends are made (Asch, 1986). What Works states that "high school students who complement their academic studies with extracurricular activities gain experience that contributes to their success in college" (p. 62). But what child or youth with a disability can stay after the modified school bus leaves or get to weekend activities?

Parent/teacher conferences are pivotal, yet parents of Black children with a disability have little or no success in communicating with professionals, and such conferences often provide no real basis for teachers and parents to understand the child's problems or to do something to improve his/her performance (Pinkney, 1984). Parents need to be empowered as advocates for the best possible educational experience for their children, for these skills can be taught to children.

Teacher Behaviors. In recent research on the motivational processes of Black children, sociologists have found that the use of praise and the offering of help may have unintended negative consequences, conveying to students that they are low in ability (Graham, 1986). Praise for success at easy tasks and the absence of critism for failure at easy tasks communicated to recipients of this feedback that they were low in ability. Also, individuals who received unsolicited help from the teacher were perceived by others and themselves as lower in ability than students whom the teacher does not help. These findings are particularly relevant to the Black student with a disability, for whom sympathetic behaviors from teachers are routine. Teachers must become aware of these behaviors and modify them so that positive expectations of ability are communicated.

Teachers should also be aware of the effects of their evaluations. A child who receives a C in grade one often continues to receive average grades in subsequent years, although teachers remark that they are "delighted with progress." (Ogbu, 1978). By receiving the same rating year after year, the child does not learn to associate hard work or effort with higher marks or rewards. What the student is learning is helplessness.

Teachers, school psychologists, and counselors should be particularly alert to the cost of testing, misclassification, and ability grouping. Misclassification, based on standardized tests, can result in children who are different being channeled into special education classes, thereby preventing them from receiving high quality education. The same phenomenon has been observed in tracking, or ability grouping. Blacks are underrepresented in the top tracks, which have superior curricula and college preparatory courses, and are overrepresented in the bottom tracks. At the senior high level, tracking has the effect of determining what the student will do after graduation (Ogbu, 1978). In essence, the academically rich get richer, while the "poor" get poorer. Teachers and support professionals in the schools should know these negative consequences and be equipped to measure ability in ways that do not penalize students who lack experience.

Counselors often interpret academic problems of Black students as social and psychological, and respond by substituting group counseling for academic and vocational counseling (Ogbu, 1978). Students with disabilities are also tarred with this clinical definition, with assumptions about personal adjustment being made. Regarding personal adjustment as prerequisite to classroom success, these counselors see the responsibility for adjustment as being the student's. Counselors should be sure that Black students with disabilities receive the academic and vocational counseling they need in order to succeed in class and in future occupations.

Schools. The research prompted by the Coleman report finds its simplest interpretation in the chapter on schools in What Works. Several of the principles which were extracted from the research on what makes a school effective are so important that they are listed here.

1. The most important characteristics of effective schools are strong instructional leadership, a safe and orderly climate, school-wide emphasis on basic skills, high teacher expectations for student achievement, and continuous assessment of pupil progress.
2. Schools that encourage academic achievement focus on the importance of scholastic success and on maintaining order and discipline.
3. Schools contribute to their student's academic achievement by establishing, communicating, and enforcing fair and consistent discipline policies.
4. Unexcused absences decrease when parents are promptly informed that their children are not attending school.

(U.S. Dept. of Education, 1986, pp. 45-40)

These findings are indicative of the context in which effective education occurs. They are important in the progress of Black students with disabilities.

Educational Strategies

The modifiability of intellectual functioning has led to renewed interest in early intervention. When longitudinal studies across a range of dependent measures were used to evaluate Head Start programs, low income children who had attended a preschool program were substantially less likely to be assigned to special education (Manni, et al, 1984, p. 125). The most significant difference between children who had and those who had not attended Head Start programs, when follow-up studies were done at the early adolescent period, were found to be the personal valuing of education among those who had been Head Start attenders (Slaughter, 1982). As a laboratory to explore the context of culturally different children and related attitudes and behaviors, Head Start stands alone in its emphasis on the young child and the caregivers.

Reuven Feuerstein's work on adolescent cognitive development points to the possibility of reversing the effects of early deprivation (Manni, 1984). Feuerstein and other researchers have found that adolescents may be capable of learning material once thought beyond their grasp, even though their IQ scores fall in the retarded range. As a result, Feuerstein has developed an alternative to measuring cognitive skills. Feuerstein's approach, called "instrumental enrichment", has been used in college settings to assist students in making adjustments to new and different situations (Kopp, 1985).

Children and youth who have been derailed from academic pursuits due to test scores or lowered teacher expectations can be "mainstreamed" in an academic sense through remedial approaches such as Feuerstein's. Perhaps remediation programs would not even be necessary if youth understood the logical consequence of not mastering basic skills.

> There is a clear linkage between high school preparation, college major selection, and entry into the exciting and demanding new jobs now being created in industries... if the views of employers are taken to heart, high school students will concentrate on the acquisition of good, basic, intellectual skills buttressed with preparation in math and science, if they expect to enter jobs with long-term career potential. (Anderson, 1986, p. 25)

The significance of skill in mathematics may escape the sixth grader, but a deficit in that area will soon prevent entrance into advanced placement classes and dictate career choice.

For those students who are tested and labeled as educationally mentally retarded, lowered self-esteem results (Williams and Mitchell, 1980). Preventing the development of expectations of underachievement is particularly important for children who are Black and have a disability. The construct of learned helplessness describes the cycle of a child expecting to fail and subsequently ceasing to try to learn (Biller, 1985, p. 21). Attribution, or the way in which one explains failure and success, has been well-researched and discussed as a mediator of depression (Abramson et al, 1978). Evaluation is an integral part of teaching and learning, but the way in which students explain their performance to themselves can strongly influence future effort and outcomes.

> If students who do poorly in class conclude there is nothing they personally can do to change their outcomes, then their failure could undermine their motivation and satisfaction with self and school work. However, if the teacher encourages the students to associate failure with factors that can be controlled, then the debilitating consequences of failure may be avoided. In contrast, by emphasizing the importance of internal factors as causal agents after success, teachers may further ensure continued success. (Forsyth, 1986, p. 34).

Educational approaches which build on what is known about learned helplessness and address the manner in which students are evaluated and information about the evaluation is communicated are in need of further development.

Rehabilitation. As the Black high school student with a disability makes the transition to college, a new relationship is established with the Vocational Rehabilitation Agency, because the rehabilitation counselor must decide on the eligibility of the student for services, and will perhaps pay for the tuition of college work. The rehabilitation counselor should be aware of all the educational pitfalls through which the applicant may have come, and the significance of a college education for the Black individual with a disability.

The student should consider the capacity of any college to provide the support services necessary, as well as a favorable climate for learning. The Association on Handicapped Student Service Programs in Post-Secondary Education has an excellent monograph to assist a student in making the decision on which college to attend.

The same self-advocacy skills which a parent learned must be appropriated by the student, somewhere during adolescence. Independent Living Centers offer training in communication skills and in disability rights which should be studied by Black individuals with a disability. It is troubling that Black consumers are underrepresented within the voluntary organizations or self-help groups with which I am familiar. The outreach and educational efforts described during the National Conference of the Howard University Model to Improve Rehabilitation Services to Minority Populations with Handicapping Conditions (Wells and Banner, 1986) become all the more important.

The search for effective approaches to education for Black Americans with a disability is fueled by the importance of education as the great status equalizer for both Blacks and persons with disabilities. Perhaps the most important determinant in an individual's educational and occupational attainment is a strong belief that the goal is important and achievable. Within the Black Women's Oral History Project, sponsored by the Arthur and Elizabeth Schlesinger Library at Radcliffe College, Frances Albrier summarizes her belief in education.

> My grandmother said that one must have an education to have a good life and to become something worthwile in life. To do things for others in life, one must have an education... All the teachers told us that we owed something to the race --we owed something to other Black people. The only way we could help bring them up from where they had come from was through education (Hill, 1984, p. 11).

Our task is to produce the knowledge base that makes the goal of a liberal education achievable for Black Americans with disabilities.

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EDUCATION: IMPLICATIONS FOR THE BLACK FAMILY

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Abstract

This paper presents a response to Dr. Martha Walker's article, "Effective Approaches to the Education of Black Americans with Disabilities." The author notes that in many instances Black persons with disabilities fail to make full use of rehabilitative services. Further, she notes that the families of Blacks with disabilities should realize that they have a voice in their destiny. She advocates the strengthening of the existing Black family as part of the solution. Additionally, the author observes that a partnership between home and agency is necessary for providing effective education. The author also regrets that adequate attention has not been paid to the reality of family in designing educational programs for the education and eventual employment of Black children with disabilities. The article is of value since it has implications for the education of all minority persons in the United States.

I do want to thank the organizers of this conference for the invitation to respond to the excellent paper that Dr. Martha Walker prepared. She has summed up quite dramatically the "state of the art" as it affects a significant number of the population with disabilities.

While Walker's paper speaks to a paucity of information, it is significant for us to remember that current approaches to understanding people with disabilities in our society stem from those theories in psychology and sociology dealing with differences, particularly race, class and ethnic: field theory and role relations. The concept of insider/outsider etc. are extensions of concerns about isolation, evaluation, and rejection of individuals who are different. PL 94-142 and Section 502 of PL 93-112 are also, in political perspective, the logical extension of the great civil rights movement of the 60's.

Political movements and social and psychological theory aside, we are faced with the pragmatics of a disabled population at a greater risk for problems - a population that does not always utilize services to their fullest extent, even if services exist. The problem presents itself at many levels. First the question of the disability itself. Is it acquired? Is it genetic? Is it developmental? For example, Black children are at a greater risk for cognitive problems because of environmental factors such as lead poisoning, simply because they live in older depressed parts of cities. Black babies are often born to very young mothers, who have not had the proper pre-natal care or the ability to handle highly vulnerable infants. The question of family, its structure, its economics, its ability to cope with emerging or apparent health and disability problems, is one of the basic problems which has to be addressed in terms of success in employment for Black Americans with disabilities.

A family unit that does not have housing, that has an inadequate income, that is prey to the negatives of any social system, is hard pressed to be able to support a dependent person to the point that he/she can participate in a meaningful way in an employment situation. While we can speak of the concept of "learned helplessness" that is foisted upon people with disabilities by teachers and other service providers, that implies a "choice" by people with disabilities. For many congenital, or developmentally disabled Black children and adolescents, there was never a choice, in that their families were overwhelmed and helpless in the face of specific social factors.

And yet if we speak of the urban environment, there are resources and advocacy groups. Therefore, there must be a way for families to access the system, to obtain services, to have effective relationships with schools, to question decisions, and to be a part of decision making. It is essential that families of Blacks with disabilities realize that they have a voice in their destiny.

In terms of the time and task of this panel, I would propose as a priority a closer look as to how we can strengthen family units so that they can be effective developers of productive individuals. This must be done not only in terms of existing models, but also in terms of the reality of what exists in what we know are different family structures.

- There are many different types of families in American Society.
- Biological parents may not be the persons who will assume long term care of minority children with disabilities. Care givers to children have to learn how to maximize school opportunities and to access the system.
- Existing services may not be utilized because of relatively simple problems such as transportation or more complex ones such as fear and apathy.
- Families with which we work may not have the strength upon which many of our family intervention and support projects were predicated. The concept of "readiness" should be analyzed in terms of the caregivers' ability to utilize existing support sytems.
- Family support systems must be viewed as developmental.
- Support systems must be developed in terms of eventual self-advocacy and independence in terms of decision making by families and/or caregivers.
- Families and children exist in different population environments that in themselves necessitate different organizational strategies.
- Life skills, whether they are simple self-help task or math concepts, should be part of all planning, whether it be family support systems or formal education.

- Intervention and support at any level should be goal-oriented and should fall within the capabilities of the particular agency.
- Interagency planning is a must. Duplication of services should be avoided and those agencies which have specific skills should be encouraged to use this expertise to meet overall objectives.

The problem of paternalism and "letting go" is ever-present and is the other side of learned helplessness. We should always be aware of this fact as we try to provide for meaningful services. The goal is partnership in service utilization and eventual independence in utilizing resources.

To provide for effective education implies a partnership between home and agency. That statement you may say is a cliche that is good for meetings but does not always hold up in the face of reality. What I believe is missing is the understanding of the reciprocity of these relationships. This means understanding of goals, aspirations, strengths, and limitations. I do not believe we have paid the type of attention that we should to the reality of family in designing educational programs for children who have disabilities and are Black, insofar as eventual employment is concerned. In reviewing the available literature in the field one begins to appreciate how little there is to assist us directly with the issues with which the conference concerns itself. Available material used that speaks to the issues of families highlights the uniqueness of different families, but there is a minimal attention paid to the fact that the complexities of family life as presented pose no fault in reality, but rather reflect a need that authors simplify for educational purposes.

This conference should lead the way in trying to both explore and plan for programs and activities that will address the specific problems raised today. Thank you again for this opportunity to express my thoughts.

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EFFECTIVE APPROACHES TO THE EDUCATION OF BLACK AMERICANS: A RESPONSE

BARBARA HARDAWAY

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Abstract

The author recognizes that education is the key to actualization of dreams. According to the author, an ideal educational base is one that provides both academic challenges and personal acceptance for one's physical realities and potentials. Hence, she makes several recommendations: Educators should avoid the use of language that portrays people with disabilities in a negative way through the use of discrediting descriptors. She also recommends that educators should establish human relation classes and stigma workshops to provide broader knowledge about impairments. Finally, she recommends family and personal advocacy training for purposes of vital social networking and role modelling for phsically impaired children.

We are addressing several issues of concern when evaluating the plight of a group of people who are stigmatized for being "distinctive" in this society. It is without question that education provides enormous possibilities for all people to actualize their dreams. An educational base that provides both academic challenges and personal acceptance for one's physical realities is, in my estimation, the most comprehensive approach that will enable us as physically impaired persons to explore our potential.

I suggest that educators and other professionals refer to "us" as having an impairment that may be of physical, hearing, visual, emotional or mental nature. Language has a strong impact on the way in which persons see themselves and others. Educating the physically impaired Black student involves paying careful attention to the appropriate use and definitions of descriptors. Words like "disabled" and "handicapped" have become negative descriptors because their projections are delimiting (Goffman, 1963). These words stress, though perhaps unconsciously, "the helplessness learned" and vulnerability associated with people who are physically impaired. These terms further reflect the ambivalence and inability of physically non-impaired persons to perceive and confront impairments as a natural reality of the human condition.

Negative descriptors such as those briefly mentioned which have served the purpose of categorizing us, have been helpful in the past for determining our medical and technological needs, and have perhaps influenced those who donate their time and money to assist us in achieving our goals. However, negative and vague descriptors are also damaging: they imply and project that a physical impairment is disabling and further increases the gap that emotionally exists between physically impaired and physically non-impaired people (Hardaway, 1985). I also suggest to you that people who possess a physical impairment are devalued in terms of self-esteem when being labelled inappropriately. The educational community should support training programs and provide workshops and seminars that examine the impact of language on Black students with physical impairments for a more comprehensive educational setting.

Another task that the educational community is charged with and that is to "take the mystery of having an impairment" for students. Developing curricula that focus on "informing students about various impairments" so that students can explore this dimension in order to unlearn, as well as learn, new behaviors and attitudes about themselves and physically non-impaired people. Human relations classes and stigma workshops need to be established as part of school programs to provide a broader knowledge base about the "human condition." Such curricula have the potential to benefit all students regardless of the overt presence of an impairment. The agenda should stress informing and educating students about physical realities, and providing forums to address myths and the emotionalism that are critical dimensions of this topic.

My final recommendations are actually points that cannot be stressed enough in forums such as these. Family and personal advocacy training is vital. It has been crucial to me in my academic journey to have had role models who promoted the reality that we are all as big as our dreams. To know that there are successful physically impaired Black people in our world is often the encouragement that we seek. Being able to experience a positive self-image, that is reinforced by others, makes for a successful person, regardless of the goal or the achievement.

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EFFECTIVE APPROACHES TO THE EDUCATION OF BLACK AMERICANS WITH DISABILITIES

SESSION B: SUMMARY

Recorder: Dr. Juliette Simmons
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We do not have adequate knowledge to prescribe effective approaches to education of many Americans, much less citizens who are dually devalued in our society. The research to pinpoint the variables is limited at best with respect to race and disability as a combined and/or separate force.

The items focused on include:

1. The educational gaps between Black and White children must be vigorously addressed.
2. Lack of education is a risk factor for disability and the overall quality of life.
3. Distinctive cultural achievements need to be addressed to help children have role models.
4. Most schools perpetuate the White culture, and this should be changed.
5. Many of the cognitive problems are based on lower expectations of students who are Black and disabled.
6. Whites are much more likely to be identified as learning disabled, whereas Black students are more likely to be labeled educable mentally retarded.
7. Psychological testing and interpretation of tests with misclassification and ability grouping are a means of closing the door for quality education and advancement.
8. Teachers, counselors and families encourage "learned helplessness." This cycle is that of a child expecting to fail.
9. The teacher should help the student realize that factors associated with failure or success can be controlled.
10. Vocational Rehabilitation has offered Blacks with disabilities primarily vocational and technical assistance.

11. Educational attainment for Blacks does not necessarily lead to job advancement.

12. Traditional educational process puts Black children at risk because they are being asked to master two cultures.

13. Schools encourage Black children to fail through:

    a. teacher attitudes and expectations
    b. testing, misclassification and ability grouping
    c. classroom dynamics with negative reinforcement

14. Recent research shows that persons with disabilities:

    a. are segregated in the classroom
    b. experience less peer interaction and less focus on social skills
    c. face a stream of negative responses
    d. lack exposure to enrichment programs
    e. receive less encouragement

15. Attitudinal barriers for the disabled are more severe than for Black Americans.

16. Attitudinal barriers include the Government with the "cuts" in federal funding for programs, thereby depriving many poor families of food, clothing, shelter, and medical care, which, in turn, are reflected in poor educational and job performance.

RECOMMENDATIONS:

1. Parents should be educated to be effective as case managers for their children.

2. Black and disabled role models are important.

3. Parents should be informed of the rights of their children.

4. Self-involvement and self-advocacy should be encouraged.

5. Community outreach through churches, fraternities, sororities, and other groups is necessary.

6. Teacher retraining is mandatory.

7. Parent-teacher conferences are pivotal and must be encouraged.

8. Teacher behaviors are an important part of the motivational process of Black children. Students who receive unsolicited help from the teacher are perceived as lower in ability than other students who do not receive such help.

9. Counselors often interpret academic problems of Black and disabled students as social and psychological and respond by substituting

group counseling for academic and vocational counseling.

10. The following are variables for effective schools:

    a. strong instructional leadership
    b. emphasis on basic skills
    c. anticipation of scholastic success for all students
    d. fair and consistent discipline in schools
    e. continuous communication with parents or guardians regarding absences and progress.

11. Black and disabled youth who have been designed for failure can be mainstreamed through "instrumental enrichment."

12. The"Head Start" program should be expanded, since it stands alone in its emphasis on the child and caregivers.

13. Rehabilitation counselors should be aware of the educational pitfalls the applicant has been subjected to and should support his/her need and his/her request for a college education.

14. Support should be given to strengthen the Independent Living Centers which offer training in communication skills and disability rights.

15. Black consumers need a wider representation in voluntary organizations and in self-help groups. These linkages are valuable.

16. Persons having a disability should not have to experience negative descriptive labels reflecting their disability.

17. Workshops should be held regularly to focus on informing and educating everyone regarding disabilities. This would reduce the fear, ignorance and avoidance syndrome.

18. There is a need for role models for Black students with disabilities to let them know that they can be as big as their dreams.

19. Greater impetus should be focused on individuals' educational and occupational attainment knowing that the goal is important and achievable with hard work and self-discipline.

20. Every segment of American society must be educated to understand that Black Americans with disabilities have talents and potential for skills and intellectual development which would enhance their abilities to achieve social and economic worth.

21. Government, industry, commercial and other organizations must be encouraged to recruit, train and give opportunities to this segment of society.

22. Educational institutions must assume leadership in developing programs, services, facilities, and motivation for Black and disabled Americans.

23. More research is needed in this area.

SECTION IV.

BUILDING BRIDGES TO REHABILITATION

REHABILITATING BLACK AMERICANS WITH DISABILITIES

SESSION C

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REHABILITATING BLACK AMERICANS WHO ARE DISABLED

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Abstract

The current status of many Black individuals who have disabilities results in a heightened need for rehabilitation services. However, the literature reflects that Blacks are not accessing rehabilitation programs at a level consistent with their needs. Therefore, the present article provides specific recommendations for problem solving. If implemented, these recommendations would better ensure quality access, service delivery, and employment for Black consumers.

> "One of the most pressing areas of challenge confronting contemporary society is that of helping Blacks, who may be physically handicapped, translate their potential into self-fulfilling social and economic roles." (Ayers, 1977, p. 432)

The realities of disability in the late 1980's continue to be powerful in American society which values youth, the Pepsi Generation, and perfection. Combine disability, racial minority, plus being female, and the realities of subordinate status may be overwhelming. Yet, rehabilitation by virtue of its philosophy is an excellent resource for assisting Blacks with disabilities to achieve quality lifestyles.

Since the inception of public rehabilitation, emphasis has been placed on improving the quality of life for persons who have disabilities. Two fundamental assumptions in rehabilitation support this emphasis. The first states that everyone in American society has an inherent right to opportunities in order to live a fulfilling life. Secondly, it is the responsibility of society to equalize the opportunities available to people with disabilities (McGowan & Porter, 1967).

These assumptions should provide a solid foundation for ensuring that Blacks who have disabilities will receive needed services. Wilson (1986), however, pointed out "that we still face problems in extending to ethnic minorities and culturally different persons the benefits of the rehabilitation system" (p. 55). As early as 1977, Ayers (1977) alerted us to the lack of access to rehabilitation for Blacks. Regrettably, the trend is enduring as "minorities continue to be viewed as less than ideal clients for the system as it is organized, budgeted, staffed, directed and evaluated. They (minorities) experience problems in accessing and in receiving the developmental benefits available from participation in the system" (Wilson, 1986, p. 55).

Thus, a re-examination of the Black consumer's participation in rehabilitation is warranted. The purpose of this paper is to provide a brief historical and current overview, and to focus on clarifying issues, exploring strategies, and providing recommendations which could lead to increased positive rehabilitation and employment for Blacks.

State of the Art

All is not well in America or rehabilitation for Blacks, especially those with disabilities.

a. Black babies are twice as likely to die before their first birthday when compared with White babies.

b. The life expectancy for Blacks is approximately six years less when compared with that of Whites; and

c. Black males are seven times more likely to be murdered than White males and experience greater chances of dying from cancer and heart disease (The Milwaukee Journal, Sunday, October 28, 1984).

The National Urban League (1985) reported the following alarming information:

a. One-third of Black adults who want work can't find it, and two out of three Black teenagers are in the same boat;

b. The average income for Black Americans is 58 percent of that of White Americans;

c. In 1982, the median Black family income was $13,598 while the median income for White families was $24,593; and

d. Black female-headed households have the lowest median income of any family type (p. 8).

During a recent meeting of the congressional Black Caucus Health Braintrust, doctors and other health activists provided several explanations why Blacks are more susceptible than Whites to certain unhealthy conditions: "Blacks are more likely than Whites to be poor, to have unhealthy diets, and to live and work in undesirable conditions" (The Milwaukee Journal, 1984, p. 12). These factors seem to increase stress levels and negatively affect admittance to health care.

Similarly, Allan (1976) reported, "Black persons were about one and one-half times more likely to have a disability than Whites. Thus, 21 percent of the Blacks and 13 percent of the Whites reported that they had a disability... Blacks were twice as likely to be severely disabled" (p. 21). Regardless of the source of the evidence, the reality mirrors tragic conditions for most Blacks in America.

Specific to rehabilitation, the data continue to reflect negatively for Blacks. For example:

> A remarkable 52.2% of all employed black women with a disability have service jobs. The figure is 31% for nondisabled black women. These are among the least stable and lowest paying jobs in business. The highest proportions of black men with a disability who work are found in operative, craft, service, and laborer positions. (Bowe, 1984 cited in Rehab Brief, p. 3)

Atkins and Wright (1980) compared Black and White participation in rehabilitation and reported that: Compared to Whites, Black VR applicants were not only more likely to be screened out (found ineligible), but, if made eligible for service, Blacks were less likely to be rehabilitated. Cases closed before successful completion of the rehabilitation process after acceptance nationally were Blacks: 42.25%, and Whites, 34.68%. Despite their reduced financial resources, Blacks received less costly VR services than Whites; and statistically significant differences were found between Blacks and Whites throughout the rehabilitation process. These differences led the authors to conclude that "Blacks fare worse than Whites at every step from referral to closure" (Atkins and Wright, 1980).

When Baldwin and Smith (1984) examined factors believed to be predictive of the referral and rehabilitation process in this country, they found results similar to those of Atkins and Wright (1980). They were interested in examining the role of race and the impact of other social-demographic variables on referral and the rehabilitation process. Multiple regression was used for the analysis. An analysis of the data revealed that the independent variable, for the most part, had either a direct or indirect effect on the outcome of referral and rehabilitation. More specifically, the results suggest that bias exists in the referral and rehabilitation process.

The conditions highlighted by these studies and similar literature challenge rehabilitation personnel to work more diligently to improve Black client, student, counselor, administrator and educator involvement in rehabilitation.

Issues Clarification and Strategies

The themes and suggestions that have resulted from the various ideas related to Blacks with disabilities and rehabilitation focus on the following: (a) The need for service providers to recognize that experience and meaningful exposure to Black persons is required for maximum effectiveness; (b) the recognition that there is no master plan for working with Blacks; and (c) the need to view each client as an individual even though generalities may be advanced in certain instances.

Avila and Avila (1980) pointed out that the typical reaction of non-minority persons to an analysis of a minority group is boredom. Although my goal is not to be boring, it is important to be reminded that the perplexities of being Black and having a disability are increased due to the primary and secondary effects of racism. Racism may be conceptualized as the wind. You know it's there, you never see it, you never touch it, but you feel it. At full force, it can destroy. The primary effect of racism is discrimination and/or exclusion, which all too often lead to inequalities in education, housing, employment, social-economic status, and rehabilitation services. The combination of the effects of racism and poor health results in a large percentage of Blacks being unable to adequately utilize or attain their personal and economic potential. Yet, by virtue of its philosophy and specialization in servicing persons with disabilities, rehabilitation is an excellent program to help such Blacks transform their potential into self-fulfilling roles (Atkins, 1980).

Personnel

A logical starting point for issue identification and clarification is rehabilitation personnel. "The counselor's understanding of the major variables operating in the life of an individual whose origin and traditions are rooted in a divergent sociocultural experience is crucial to successful rehabilitation outcomes" (Pape, Walker, and Quinn, 1983, p. 18). Thus workers performing the daily activities in a system possess the power to foster or impair creative ideas and actions. Before rehabilitation workers can be successful in the rehabilitation of Black persons with disabilities, they must first involve themselves in "self-rehabilitation". Much of what is accomplished in rehabilitation is a reflection of the beliefs, views, and philosophies of its professionals. Specifically, "if professionals in social and rehabilitation agencies are going to increase their efforts in serving Blacks with disabilities they are going to have to examine and change some of their attitudes" (Ayers, 1977, p. 425).

Most rehabilitation personnel are not Black. This statement is not intended to advance the assumption held by some that only Blacks can work successfully with Blacks. The research in this area is at best mixed, but certain inherent problems must be noted.

First, most rehabilitation professionals are members of America's middle class possessing middle class ideas. Middle class Whites have not lived in Black communities and are usually only superficially aware of Black problems. Second, most rehabilitation workers possess educational degrees above high school level, unlike many of their Black clients. Third, few workers have been exposed on a daily basis to discrimination and prejudice. Finally, many rehabilitation professionals have not experienced the daily survival tactics employed by Blacks living in urban and rural poverty situations.

These inherent problems suggest that rehabilitation professionals could benefit Blacks and all Americans in general if they develop an enlightened sensitivity to the problems of this minority group, develop and support networks which foster social change, and destroy the assumption that the victim is to be blamed for his/her misfortune.

Some rehabilitation personnel hold negative views about Blacks, believing that Blacks are lazy, possess low intellectual abilities, destroy property values, and have low personal morals. Negative views about Blacks who have disabilities can, therefore, interfere with the counselor's ability to work constructively with these clients. Often the results for Blacks with disabilities is non-acceptance into a rehabilitation program or unsuccessful closure. What is needed are methods to individually and in groups identify, explore, and eliminate negative stereotypical ideas.

Programs designed to improve personal growth and awareness among rehabilitation personnel must have clearly outlined objectives with rewards available for those who grow or improve. Case loads can be assessed for identification of particular problems being encountered by the employee. Programs focused on growth should be joint endeavors between Black consumers, educators, administrators, counselors, students, secretaries, and other rehabilitation workers. Each of the previously mentioned groups can identify general, role-related, and personal goals aimed at a comprehensive program. It is important to remember that Blacks are reluctant to trust rehabilitation if worthwhile examples are not set from within. Therefore, rehabilitation counselors are urged to explore their values and beliefs through a series of meaningful experiences designed to increase success for Black consumers in rehabilitation.

In exploring the attitudes and roles of rehabilitation professionals working with Black consumers, the role of the limited number of Black professionals in rehabilitation cannot be overlooked. Black rehabilitation professionals need an acute awareness of the rehabilitation and community problems of Black clients and a knowledge of various counseling, educational, and learning techniques which can be used to promote successful outcomes.

These professionals must suggest creative ideas for use in rehabilitation; design and teach courses that focus on vital concerns of Blacks; present papers at national and local conventions which emphasize positive aspects of the Black experience; and conduct research in areas relevant for rehabilitation services to Blacks. This is a gigantic task for the limited number of Black rehabilitationists, but one that can be accomplished if each Black rehabilitation professional assumes an active leadership role and receives cooperation from his/her majority co-workers.

In summary, to enhance services to Blacks who have disabilities, rehabilitation personnel must continue to develop programs which allow for enlightened sensitivity to the problems of Blacks, increased awareness of Black life styles, and clarification of their own attitudes which may foster or hinder service delivery.

The Rehabilitation Counseling Process

Creative use of the rehabilitation counseling process can be another method for increasing rehabilitation's potential for effective service delivery to Blacks. The rehabilitation counseling process includes interpersonal communication and assistance, plus the coordination of services for clients with a variety of other human service agencies leading to successful employment. This model serves to assure quality service to clients. How effective is the rehabilitation counseling framework for serving Black consumers? A universally accepted answer cannot be provided, yet available information reflects numerous issues that warrant closer examination.

Thoreson and Haugen (1969) suggested that "the fifty-minute hour in counseling used to service middle class America tends to become absurd when applied to the vast complex problems of the disadvantaged" (p. 31). Rehabilitation counseling has its roots in traditional theories of counseling focused on middle class counselees. This does not mean that constructive and gratifying relationships cannot be developed with Black persons with disabilities. This does mean, however, that the counselor will need to remain flexible in his/her approach.

To adequately service Blacks, one cannot ignore race and social factors. The counselor should learn about the history and culture of his/her clients and utilize this knowledge constructively in the counseling process (Pape, et. al., 1983). Knowledge should aid the counselor in developing sensitivity to verbal and non-verbal cues while interacting with diverse clients. Jones and Jones (1972) stressed that "if the counselor does not recognize the person whom he faces as a fellow human being and does not listen to him as such, he cannot relate to him in a meaningful way, he cannot act constructively toward the person, nor expect the person to act constructively toward him" (pp. 195-196).

Hutchinson (1970) identified an important problem for consideration by rehabilitation counselors. Many minority clients feel that majority counselors are unable to understand their situation. Similarly, Jenkins and Amos (1983) reported that "Black students with disabilities were not very enthusiastic about services providers. Many reported not being informed of services, not receiving eligible services and receiving negative treatment" (p. 57).

This discussion regarding services to Blacks with disabilities is not meant to suggest that the "goal" of rehabilitation requires changing, but rather that rehabilitationists must remain sensitive to, and flexible, in methods used to attain these goals. The rehabilitation counseling process has much to offer

Black persons with disabilities, yet the challenge remains one of increasing quality and quantity service delivery to Black persons with disabilities.

Rehabilitation Counselor Education Program (RCE)

Rehabilitation educators have a major role in eliminating some of the injustices suffered by Black persons with disabilities. An important contribution can be made if educators actively recruit minority students and educators to serve as role models. Inclusion of more Blacks in rehabilitation education would serve to provide all rehabilitation students and educators with that exposure to members of the minority group needed to prepare leaders, and to ensure contributions by Blacks. Blacks are not adequately represented in graduate and undergraduate RCE Programs, which implies that justice alone should dictate that efforts be increased to recruit more Blacks (Carnes, 1972). This process should involve not only recruitment, but also retention, and development of opportunities for advancement.

Educators must continue to re-evaluate their curriculum offerings and include courses which deal with racial issues, attitude changes, and alternatives to traditional counseling techniques. Standard courses in rehabilitation education should have at least one unit devoted to minority concerns. Films, tapes, and Black persons can be vital resources for implementing a valuable program.

The national leadership position held by rehabilitation educators can be utilized to alert the profession on a consistent basis to the needs of Black consumers. Lectures, workshops, and seminars can be conducted which focus on relevant concerns of this minority group. National efforts can be initiated by leaders in rehabilitation education, and self-monitoring can be accomplished, resulting in a move from "tokenism" to equality.

Practical experiences in rehabilitation provide excellent opportunities for educators and students to become exposed to the reality of the Black experience. Agencies serving predominantly Black clients should be included as placement opportunities for students. This type of experience has numerous values: (a) it provides an opportunity for students to meet and work with Blacks; (b) it provides avenues for didactic information to be tested; (c) it can enhance university-community cooperation; and (d) job opportunities can be developed in the agencies for rehabilitation graduates.

Continuous research related to service delivery for Blacks is needed. Educators can make outstanding contributions in this area. A readily available method to conduct research is through Masters papers and Doctoral dissertations. Students should be encouraged to explore minority issues. Areas needing immediate attention include identification of Black persons with disabilities and their needs, evaluation of tests for the assessment of Black clients, additional clarification concerning personality and cultural aspects of Blackness, development of motivational techniques to encourage White students to work with Black persons with disabilities, and establishment of models for counseling Blacks within rehabilitation.

Rehabilitation counselor educators must help to ensure that Black participation occurs at all levels of rehabilitation. National, regional, state, city and community participation must be included in a comprehensive plan for Black involvement. As faculty positions become available, educators should actively recommend and appoint qualified Blacks. If none are available, on-the-job training should be viewed as a reasonable alternative.

These are but a few of the challenges which face rehabilitation educators today. Rehabilitation needs more Black educators, students, and researchers to significantly effect changes for Blacks with disabilities to move closer to equality within rehabilitation and American society. Minority educators, students, and researchers must also assume a positive stance in bringing about more effective participation in rehabilitation by Black clients with disabilities.

In summary, the critical role of rehabilitation supervisors, administrators, and policy makers is to be noted. Throughout the preceding discussion there runs the belief that no successful outcome for Black consumers can occur without support and leadership from top-level rehabilitationists. Therefore, the following specific recommendations are provided for those rehabilitation personnel concerned with enhanced employment success for Blacks who have disabilities.

Recommendations

Agencies

It is essential that all rehabilitation agency personnel clarify their purpose, policy, process, product and performance appraisal as they relate specifically to Blacks. An integrated comprehensive plan to effectively include Blacks in rehabilitation programs is necessary.

At the policy, agency and decision-making level, organization development (OD) is suggested. OD has been defined by French and Bell (1984) as:

> a planned, systematic process in which applied behavioral science principles and practices are introduced into an ongoing organization toward the goals of effecting organization improvement, greater organization competence and greater organizational effectiveness. The focus is on total system change. The orientation is on action--achieving desired results as a consequence of planned activities (p. 1).

OD offers a process that is supported by top level personnel with long-range goals which are especially relevant for Blacks. All too often, policy and goal statements regarding Black inclusion are designed to effect change in only one unit of the organization. Such shortsighted planning is destined for failure. If an agency is committed to becoming more inclusive, all aspects of the agency require examination and refinement.

Organization development has several specific aspects regarding Blacks which are useful to agencies. First, problem-solving is a necessary component. Next, the use of a variety of teams is essential to continued renewal. Third, a consultant-facilitator is used to assist agency personnel in goal attainment. Finally, research is an integral part of the OD process (Frencn and Bell, 1984). Clearly, a commitment to OD is a commitment of resources and a desire to change.

If OD is to be an effective strategy for improving minority participation and success, organization, individual (personnel), and consumer values must be integrated. Each agency must arrive at an honest answer to the question, "What policies currently exist which impede success for Black clients"? Rasch (1979) suggested that feasibility criteria may be one of the most exclusionary policies used in human service for non-Whites. Feasibility involves not only the client's qualities but the agencies' willingness to commit resources. Too often, personnel view feasibility as only a client component and fail to accept the interaction between the Black consumer and the services they are willing to provide. "As the rehabilitation assets of the clients decrease, the commitment of the agency must increase..." (Rasch, 1979, p. 28).

The policies, purposes, processes, products, and performance appraisals employed reflect the agencies' pledge to minorities. It is essential that each agency examine its current status to determine the type of modifications needed. The decisions made regarding change will impact on services for Blacks far into the future.

Resources

The following types of resources may be tapped to enhance and increase positive rehabilitation outcomes for Black clients with disabilities:

1. The most valuable resource available for assisting Blacks is the minority individual him/herself. Meaningful dialogue must be developed with consumers to obtain their views of their needs and suggestions for improved delivery systems.

2. Teamwork is essential in developing strategies and methods for service provision to cross-cultural clients. Although the concept "teamwork" has been misused, the strategy must be included in any feasible approach to improve employment for Blacks. The complexity of problems for Blacks with disabilities makes teamwork a necessity rather than a luxury. My recommendation for an effective team includes professionals, paraprofessionals, employers, and consumers/advocates. The quality and success of the team is measured by the success of the consumer.

3. Family, self-help, "buddy" system, and networking provide excellent resources for use with Black clients. These resources provide a sense of belonging and shared concerns, a method for self-expression, methods to help others, and linkage to needed services.

4. Rehabilitation personnel must be competent and educated in cross-cultural counseling and research.

    a. Personnel must allow the minority person to bring his/her individuality and group membership into the system. This is not a trivial statement, but is felt to be the key to acceptance of the client and to rapport building.

    b. Personnel must be involved in attitude clarification, in-service and continuing education.

    c. Personnel must be comfortable with clients who are racially and culturally different from themselves and must be able to communicate this comfort to their clients.

    d. Specific knowledge about how racism affects the efforts of Blacks to become more fully functioning members of society is required.

    e. Assertiveness in casefinding of Black consumers is essential.

5. Recruitment programs must be developed and implemented in practice and education.

6. Minority personnel must assume an assertive stance in program development, research, and evaluation to better ensure meaningful access, service, and outcome for Black clients. An important contribution can be made by minority personnel serving as role models.

7. Rehabilitation personnel at all agency levels must project a postive/optimistic stance, assume a pro-active vs. reactive role, and work to develop communication and service linkages with personnel in other systems (education, law, economics).

Research

Researchers are encouraged to focus on the following problems and issues:

1. Research which discusses race in regard to rehabilitation and Blacks remains inconclusive. Yet, available information strongly suggests that race cannot be ignored. Rehabilitation personnel are cautioned not to view research as a panacea to problem-solving, but research can provide guidance for practical interventions. Smith (1977) provided some cautions that personnel need to consider when involved in and attempting to use research:

    a. Research must be interpreted and used within a positive context;

    b. Not all researchers are motivated by "good" intentions; and

    c. Considerable research conducted to assist minority persons has led to increased stereotyping and exclusion.

2. Prevention and intervention research needs increased coordination regarding special populations. Rehabilitation researchers need to work in concert with minority investigators and other concerned individuals and groups.

3. Funding for meaningful rehabilitation research on Blacks needs inclusion in legislation. All involved in psychosocial health must identify a political stance and advocate appropriate research funding.

4. "A national institute for research on minorities would facilitate rehabilitation investigations regarding disabled non-Whites" (Atkins, 1986, p. 145) and enhance successful employment outcomes.

Summary

Despite all the limitations associated with being Black and having a disability, Blacks possess strengths, and rehabilitation personnel must build from a positive rather than a negative stance. Clearly, this is one of the basic strengths of rehabilitation, a focus on assets with an awareness of limitations.

Thus, rehabilitation is an example of a modality which has a meaningful potential for assisting Blacks with disabilities. As a result, rehabilitation resources must be effectively used to respond to the challenges of rehabilitating Blacks. We must seek out and duplicate effective modalities (e.g. Howard University, Harlem Hospital Center). The format for such activities can take a variety of forms, but it is essential that constructive action occur. Additionally, fiscal and intellectual resources are indispensable. Blacks must be allowed to speak for themselves, to develop skills to assume leadership roles, and to take risks. Ultimately, success will depend on the willingness of majority members in and out of rehabilitation to share power and available resources with Blacks.

Worthwhile projects that relate to Blacks have been accomplished in rehabilitation (e.g. Howard University Model). Nevertheless, there is still work to be done at all levels. It is not the time for rehabilitation to rest on its laurels. It is time for modifications, extensions, and valid rehabilitation practices which facilitate the successful rehabilitation and employment of Blacks with disabilities. If the history of advances in rehabilitation of persons with disabilities is a continuing "Redefinition of the Unacceptable," let us plan now to take bold new steps in removing the unnecessary and unacceptable barriers to full participation in community life for persons with disabilities (Fenderson, 1986, p. 9). We have espoused a philosophy and collected data; the time for action is now.

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POVERTY, RACE AND DISABILITY

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Abstract

This paper examines the relationship between poverty, race and disability. The authors focus on New York City's Harlem as an example of a predominantly Black community faced with numerous social and economic challenges. Results include the following findings. Central Harlem -- with its population approximately 95% Black, in 1980 had an annual median family income of $9,185, which is significantly below the annual average of both New York City ($16,818) and the United States ($19,917). Reasoning from its very high incidence of diseases and injuries, the major causes of disability, the authors conclude that there exists "an inexorable and odious connection between poverty, race and disability." With an approach to Harlems's problems stemming from poverty, disease and disability seen as a model for dealing with the same problems on a national scale, the authors list "certain principles of approach... critical to the achievement of reasonable progress." Noted as precedents, are examples of massive national assaults on problems facing America in the past.

These observations draw, in large part, upon some twenty years experience on the front lines of the war on physical disability in Central Harlem. Central Harlem, New York City for those who are not familiar with this unique social and geographic entity, is a two and one half square mile area which in some respects is a microcosm of Blacks in America, and in some respects a microcosm of poverty in America. In Central Harlem, the major issues concerning disability are poverty and the slowly diminishing vestiges of a long era of institutionalized racism.

What is so unique about Harlem? Harlem is a ghetto, an almost uniformly Black society formed by 95 percent of the population.

TABLE 1

Median Family Income in Central Harlem and Other Areas (1980)

Central Harlem	$ 9,185
New York City	$16,818
New York State	$20,187
United States	$19,917

Source: U.S. Bureau of the Census.

Similar to many ghetto societies, Harlem is profoundly inbred and distinct from its surrounding communities. Few other New York communities are as homogeneous. The median family income (Table 1) in 1980 was $9,185 compared with $16,818 for the city as a whole. As is usually the case in poor communities, health statistics show the prevalence of most diseases and injuries far in excess of the general population, often in stark contrast with neighboring middle and upper class communities. For example, the rate of tuberculosis is probably the highest in the whole country (Table 2). In 1986, the rate of new cases in Central Harlem was 130.4 per 100,000 population. This rate was 4 times that of New York City, 8 times that of New York State, and almost 14 times the national rate. Indeed, it approaches the highest rate in the western hemisphere.

TABLE 2

Prematurity, Infant Mortality and Tuberculosis in Central Harlem and Other Areas (1986)

	Prematurity (< 2500 gms) (% live Births)	Infant Mortality (per 1,000 live Births)	New Tuberculosis Cases (per 100,000 pop.)
Central Harlem	20.5	27.6	130.4
New York City	9.0	12.8	31.4
New York State	5.9	10.6	16.0
United States	6.8 (1985)	10.4	9.4

Sources: Bureau of Health Statistics New York City Department of Health; Vital Statistics, New York State Department of Health; the National Center for Health Statistics; Division of Tuberculosis Control, Center for Disease Control.

The infant death rate (Table 2), another key health index, was 27.6 per 1,000 live births in Harlem in 1986. This figure is more than double the 12.8 rate in New York City, and almost triple the 10.6 rate in New York State and 10.4 rate nationally. The 1986 Harlem rate for premature births, one of the most common causes of risk for disability among our newborns, was 20.5 percent of live births, compared with the 9.0 percent rate for New York City, less than one half of the Harlem rate. The difference is even more striking at the state (5.9) and national (6.8) levels.

General mobility statistics also underscore the picture of a community in distress (Table 3). Central Harlem has the highest death rate for 12 of the 13 most common causes of death in all of Manhattan. Specifically, the death rate per 100,000 population from heart disease in 1985 was 519.7 versus 358.6 for

TABLE 3

Mortality Rates in Central Harlem and
Kips Bay - Yorkville, per 100,000 Population (1985)

	Central Harlem	Kips Bay/ Yorkville
Heart Disease	519.7	358.6
Cancer	352.5	239.1
Stroke	78.7	35.4
Diabetes	60.7	11.2

Source: New York City Department of Health, Bureau of Health Statistics and Analysis.

Kips Bay - Yorkville, primarily a middle to upper class community several blocks south of Harlem; from all kinds of cancer, 352.5, compared to 239.1; from stroke, 78.7, compared to 35.4; and from diabetes 60.7 compared to 11.2. The data also included excess death rates for various forms of accidents and drug dependence, two common causes of impairments and complex disability patterns among the persons with disabilities whom we serve.

Thus, we see in Central Harlem a gravely impoverished community with excess prematurity, disease, injury, and mortality rates. How does all of this relate to disability? These data have powerful and profound disability implications: excess prevalence, costly restoration, and a vast waste of human potential. Disability is mainly a consequence of disease or injury; and, given the high levels of these in the Harlem community, one does find evidence strongly suggestive of excess prevalence of disability in the community.

TABLE 4

Prevalence of Disability According to Race: Ages 18-64 (USA)

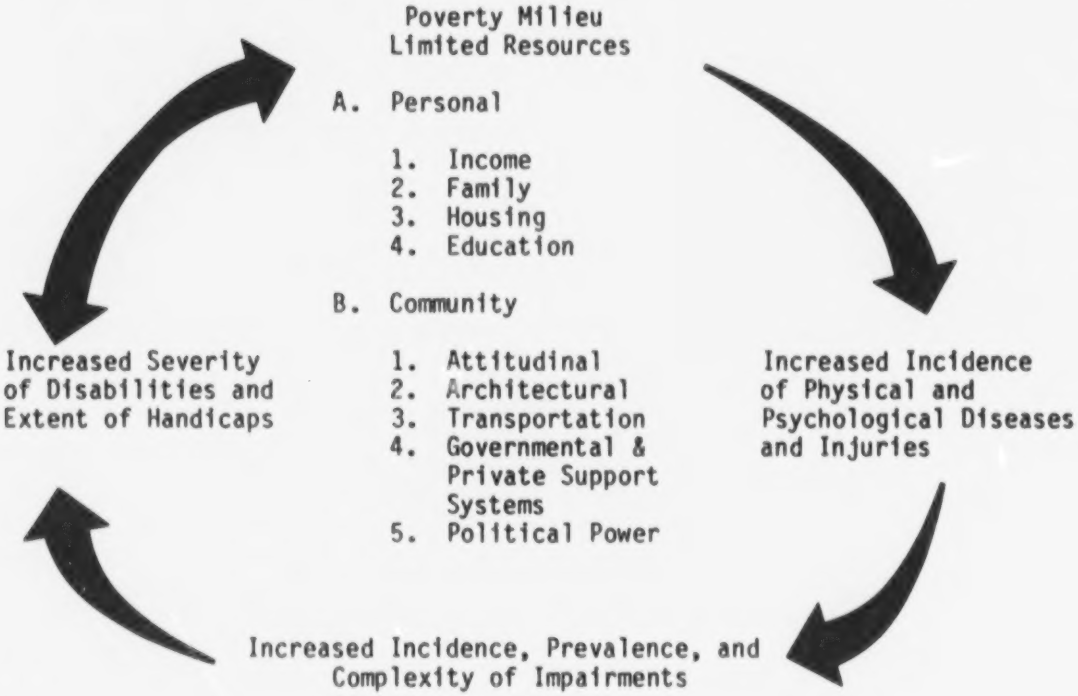
Race	Percent
White	12.6
Black	19.4
Hispanic	10.6

Source: Survey of Income and Education, U.S. Census Bureau, 1976. Data presented by G. DeJong and R. Lifchez, Scientific American; June, 1983.

Data on disability in Central Harlem are scarce and incomplete. We have some information from the Department of Rehabilitation Medicine at Harlem Hospital Center, the major health care provider for Central Harlem. Of the 1,743 patients treated by the Department in 1986, the most frequent impairments seen were various types of musculoskeletal disorders including fractures (36 percent) and newborns at risk of developing disabilities (15 percent). The Department also sees a larger percentage of amputees, burned patients, and central nervous system injuries (brain and spinal cord) than many rehabilitation units. The most frequent causes of these various impairments were: trauma (31 percent), neurological conditions (14 percent) and various types of arthritis (10 percent), closely followed by prematurity (10 percent). In 119 instances (6.8 percent of patients), substance abuse including alcohol was the direct cause of a disabling physical impairment. Precise data are not available on the large number for whom substance abuse contributed substantially to the disabling disease or injury.

FIGURE 1

Poverty - Disablement Cycle


Poverty Milieu
Limited Resources
A. Personal
1. Income
2. Family
3. Housing
4. Education
B. Community
1. Attitudinal
2. Architectural
3. Transportation
4. Governmental & Private Support Systems
5. Political Power
Increased Incidence of Physical and Psychological Diseases and Injuries
Increased Incidence, Prevalence, and Complexity of Impairments
Increased Severity of Disabilities and Extent of Handicaps

Despite the limited available information, some inferences can be made from various types of relevant information from national, regional and local sources. For example, the 1976 Census Bureau Survey of Income and Education found 19.4 percent, or approximately one-fifth of the Black population, having disabilities in its potentially most productive years (18-64). This compared with 12.6 percent among Whites (Table 4). National data from the 1981 Current Population

Survey, showed 14.1 percent of the Black working-age population having disabilities as compared with 8.4% of Whites. The figures for males are 14.3 and 9.0%. According to the 1985 Current Population Survey, as reported by the President's Committee on Employment of the Handicapped, (Out of the Job Market: A National Crisis), Blacks represent 18 percent of all working age persons with disabilities, despite the fact that in the general population they constitute just 11.5 percent. These various surveys show clearly that disability has been and continues to be more prevalent among Blacks than among other ethnic groups.

The high prevalence of poverty, disease and disability we have described is a self-perpetuating cycle (Figure 1). Poverty status is associated with high rates of morbidity which in turn contribute to higher rates of physical impairment. Physical impairment often perpetuates and aggravates the very poverty that caused it in the first place. Impairment does not always lead to disability, but in the context of poverty and racism, it almost invariably does. We see an inexorable and odious connection between poverty, race and disability.

The rehabilitation worker and agency serving minority persons with disabilility, must be well prepared and sincerely committed to deal with this devastating and enormously complex reality. Fundamental is an awareness of these interrelationships and the underlying social pathogenesis. In such a setting, certain principles of approach are critical to the achievement of any reasonable progress.

1. There must be a strong commitment to the rehabilitation process and its potential for raising the level of function and ultimate contribution to society by minority persons with disabilities. This means substantially more investment from all levels of government and the private sector for rehabilitation and disability prevention. Both will pay off in billions of tax dollars and millions of productive lives.

2. We must establish trust by attentive listening, by learning and careful interpretation of cross cultural language, and by assuring early positive responses, particularly in concrete terms.

3. We must make direct observations of the patient or client in their real life situations for both diagnostic and therapeutic purposes.

4. We must identify all barriers to rehabilitation, paying particular attention to the unique conditions of each individual situation. This will enable workers to begin early in helping to remove immediate barriers to the short term goals. Their achievement and success acknowledgment are especially critical in the early phases. Longer term goals can be built upon these invaluable early successes.

5. We must be persistent in maintaining close supportive follow-up each step of the way, realizing that the level of disability will decrease and the potential for functioning broaden as both the intrinsic and extrinsic barriers to function are progressively whittled away.

6. Instruments to measure levels of function and disability determination should be sensitive enough to reflect these changes objectively, and realistic enough to show past work history, available resources, and opportunities in the market place.

7. There must be heightened impact on the social conditions that give rise to physical impairments and that prevent full realization of rehabilitation goals. For instance, we must rid our communities of drugs, obtain treatment for those who are addicted and educate our patients about the medical consequences of substance abuse.

8. We must communicate successful approaches and areas requiring research to colleagues, curriculum planners, advocacy groups and other involved persons and agencies.

9. Finally and perhaps most important of all, workers and agencies must support and encourage the development of self-advocacy programs. We believe such activities should be central to identifying problems and establishing priorities, while providing fuel to the movement.

The rehabilitation process will be long, expensive and exhausting. But it can also be as intensely gratifying to all involved.

This population group still represents one of the frontiers of human service in general, and rehabilitation specifically. A conscious decision by our society is overdue. We must face this scandalous situation and quickly move to resolution.

The precedents are many. Think of the rebuilding of post-World War II western Europe through the Marshall Plan; the educational turnabout we experienced in the wake of the October 1957 launching of Sputnik; and the initially promising but short-lived war on poverty. Certainly we are equal to the challenge when we remember these examples of a long and magnificent American tradition.

REHABILITATING BLACK AMERICANS WITH DISABILITIES

SESSION C: SUMMARY

Recorder: Dr. M. Gerlene Ross, Chief
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Dr. Atkins, after introducing the panelists, challenged panelists to respond to the issues addressed in her paper where she called for:

1. bringing our strengths and resources together to cope with the daily struggle of survival for Black Americans with disabilities throughout the nation
2. a reexamination of the views of service providers who serve minorities, with an eye toward developing more positive views
3. a reexamination of entry criteria for eligibility to determine how we may extend the boundaries so as to include more, rather than exclude needy individuals
4. a reorientation as to how we look at clients from a "can't do" as opposed to a "can do" perspective

Professionals involved in the Vocational Rehabilitation (VR) process must examine the organizational structure thoroughly to determine how systems can be changed to accommodate the needs of minority persons with disabilities. This process must involve persons at all levels of the system so that appropriate input is received before decisions are made.

Secondly, professionals must ask consumers to work with them as a team effort since consumers may have assets and resources that professionals do not have, and vice versa. Dr. Atkins also reminded the participants to be mindful that we are operating in an environment that is hostile, where racism operates against us, where daily efforts are made to isolate us, put boundaries and limitations upon us, and prevent us from looking at the real issues confronting minorities. At the same time, Dr. Atkins cautioned against dwelling on these negative aspects, for to do so would divert our energies from those things critical to rehabilitation. Despite racism, service providers (educators, rehabilitation specialists, etc.) have a responsibility to consumers.

Personnel training was another issue of concern raised by Dr. Atkins. She pointed out that a limited number of Blacks are being recruited and retrained. Since there are so few role models it is difficult to encourage minority individuals to enter rehabilitation fields. In order to reverse the draining off of Black VR professionals, we need to work and support one another. The few that have remained in the system are overworked and underpaid; however, without the commitment of the few who do remain, our input will not be there.

Dr. Thornhill followed up Dr. Atkins' presentation with very cogent statements on the disablement of Black Americans, using Harlem, N.Y. as the microcosm of America and of poverty in America. He illustrated how disability among Blacks in the nation is a function of poverty, racism and the priorities set by the U.S. Government. Dr. Thornhill demonstrated how poverty, race, and disability interact to the detriment of Black persons with disabilities. In short, he concluded that Black disabled persons in Harlem and in the nation are poorer, have exacerbated health problems (for example, rate of TB is highest in the nation; highest death rate for 12 of 13 most common causes of death in all of Manhattan, heart disease, cancer, stroke, diabetes, etc.). In addition, he presented data on the alarming number of individuals on drugs who have become physically disabled because of drug habits which led to gangrene in limbs which required amputation as a result. Thus a vicious cycle of poverty and disablement is established. Dr. Thornhill concluded with the notion that minorities with disabilities represent a new frontier in rehabilitation which must be addressed.

Dr. Thornhill's stimulating discussion was followed by Mr. Gilliam's response to Dr. Atkins' paper from the consumer point of view. Mr. Gilliam pointed out that clients and providers are both responsible for premature closures for minority clients. He suggested that in those instances where the counselor is the offender in the closure process, the focus should be on rehabilitating the counselor. He indicated approval of the current educational levels of attainment required of counselors; however, he took issue with the lack of training and work experience with minorities required of counselors. Using examples from experience, he spoke of how counselors in the VR system place limitations on the expectations and aspirations of minority persons with disabilities. Yet, he indicated that the VR system is a system which has the potential to bring minority disabled persons out of poverty. He also suggested that oftentimes clients need more time than counselors or workers can give. The average length of time for intake (5-7 weeks) causes many members of minority groups to lose interest. Frequently the counselor over-identifies with the client due to sympathy and empathy, which causes him to see the client as a victim of the system. Finally, he emphasized that the client, the educational system, and the community have responsibilities. The emphasis of VR should be on quality not quantity.

The last panelist, Dr. Sanders, spoke of rehabilitation as a change process. In the current system, many Blacks feel alienated and helpless. There is a need, according to Dr. Sanders, to update the quality of education by adding the following ingredients:

1. networking
2. expansion of services
3. additional funding

There have been instances in which minority persons were described by counselors as persons lacking awareness of VR, who feel helpless to access the system. He also pointed out that traditional counseling theories may not be appropriate for minority clients. We must find new and creative ways to deal with test data, expose minority clients to appropriate role models, make minorities aware of occupational hazards as well as benefits of employment, and at the same time we must prepare those we serve for high tech future.

Participant discussion of issues was lively and enlightening. Several recommendations emanated from the panelists' discussions:

Jim Bellamy:

1. Provide technical assistance to minorities on how to deal with the system. Need to have more conferences.
2. Reevaluate priorities in the Black community with Blacks playing a significant role in creating an awareness of VR.
3. Professionals in VR should set up networks to share information, utilize talents and share resources.
4. In addition to providing information to individuals with disabilities it is essential that the entire community is made aware of relevent issues.

Sushila Kapur:

1. Work to change the system from the Federal level down so that quality as opposed to quantity becomes a priority.
2. The Council of State Administrators of Vocational Rehabilitation (CSAVR) should be provided copies of the proceedings of this conference.
3. All counselors should be provided training in cultural differences and how different cultures handle illness.
4. Students in training for VR should have internship training with minority clients.
5. Career education should be introduced to children with disabilities early in their education.
6. A research and training center on problems and issues of Black Americans with disabilities, needs to be established.

SECTION V.

BUILDING BRIDGES TO COMMUNICATION

COMMUNICATION AND NETWORKING: VITAL LINKS IN THE REHABILITATION OF BLACK AMERICANS WITH DISABILITIES

SESSION D

PRESENTER: MRS. ELIZABETH H. ANDERSON
PAST PRESIDENT
NATIONAL REHABILITATION ASSOCIATION

PANELISTS: MRS. YETTA W. GALIBER
EXECUTIVE DIRECTOR
INFORMATION, PROTECTION, AND ADVOCACY CENTER FOR HANDICAPPED INDIVIDUALS, INC.

MR. LOUIS SLADE
MANAGER
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SPECIAL ASSISTANT
REHABILITATION SERVICES ADMINISTRATION

MR. DANA JACKSON
EXECUTIVE DIRECTOR
INDEPENDENT LIVING FOR THE HANDICAPPED

COMMUNICATION AND NETWORKING: VITAL LINKS IN THE REHABILITATION AND EMPLOYMENT OF BLACK AMERICANS WITH DISABILITIES

ELIZABETH H. ANDERSON

Past President
National Rehabilitation Association

Abstract

The purpose of this paper is to show that communication and networking are vital in the rehabilitation and employment of Black Americans with disabilities. Studies have shown that Black Americans with disabilities are less likely to be rehabilitated and employed than their White counterparts. This paper notes that barriers to effective rehabilitation and successful employment are frequently due to limitations in communication. The author makes a number of suggestions to facilitate increased networking and communications. She cites the work of the Howard University Center for the Study of Handicapped Children and Youth, which publishes newsletters and utilizes television and radio for outreach as a model.

Communication is sending and receiving information. It girds human behaviors as well as relationships between individuals and among groups. There are forms, systems, and a process of communication. Communication shapes ideas and defines the individual. Communication is multidimensional; it transforms international, industrial, management, and administrative relationships. It touches every aspect of modern life, including education, marketing, science, and medicine. Communication is intrinsic to theology, literature, art, and architecture.

Communication is the essence of all human interaction in the universe, our values and value systems, our courtesy and manners, our child rearing practices and family relationships. Communication engenders our ability to reason, to think and to learn.

World behaviors and behavioral responses have been changed, opinions and attitudes formed and altered by influences of mass media, such as radio, newspapers, periodicals, theatre, and motion pictures, and by what has been called imperious communication: television. The influence, importance, and impact of communication cannot be diminished or denied.

In rehabilitation we have, in recent years, begun to command the attention of the world with such events as The Year of the Disabled, National Rehabilitation Month, and National Employ the Handicapped Week.

Mass media projection of fund raisers for various disabilities has for the most part been successful. However, our communication efforts have not yet reached the point where we can avoid explaining to the average person who we are and what we do when we say we work in rehabilitation.

The Challenge

Rather than focusing on a large number of barriers to communication as they relate to the rehabilitation of Black Americans with disabilities, let me mention a few. Most Americans don't hear the message that, based upon prevalence, incidence and severity, Black people -and particularly Black women- have proportionately more disability than the general population. Bowe (1983) found that Black people with disabilities are less educated and earn less than Black people without disabilities. The real tragedy is that 82% of Black persons with disabiliities are unemployed. When employed, 65% of this population earn less than $4,000 per year!

Walker, et al (1986), found that the primary source of income for this group is public assistance. One of the ways to meet this challenge is advocacy and self-advocacy for education, job training, and placement. The public education system and the Federal-State vocational rehabilitation program, which utilizes public and private vendors, are primary providers.

Ross and Biggi (1986) selected a group of White and non-White clients in the New York State Office of Vocational Rehabilitation for analysis and study. They found that "failure to cooperate" was the predominant reason stated for closure of non-White clients, while "refused services" was the primary reason for closure of White clients. In addition, this study showed that placement rates for 26 closures for White clients increased by 2%, while the placement rate for non-White clients decreased by 18%! Further, Ross and Biggi found that rehabilitation rates for White clients increased by 4%, while those for non-White clients decreased by 4.5%. They found that there was a higher tendency for White clients' cases to be closed, when these clients were placed in jobs at higher than the minimum wage, while non-White clients' cases were closed nonrehabilitated (Ross and Biggi 1986).

These findings support the view of Atkins and Wright (1980) that, considering the benefits of rehabilitation, Black clients fared disproportionately worse than White clients in the system. Clearly, new directions and approaches are needed to facilitate the access of Black persons to the rehabilitation system.

Effective Communication Strategies

Our federal rehabilitation program is the largest, if not the best, in the world. It is funded at over one billion dollars a year. Officials at the helm of the rehabilitation system affirm their intent to make services accessible to Black persons with disabilities and historically Black colleges and universities. However, large gaps in services persist.

We need more resources such as the Information Center for Handicapped

Individuals in Washington, DC, which provides information and referral services, a client assistance program to follow up on referrals to ensure effective and timely service delivery, as well as other services. With supports such as these, Black individuals with disabilities can be equipped with assertiveness and self-actualization (Galiber 1986).

Access to these services and information systems implies the ultilization of media resources for outreach. The Howard University Center for the Study of Handicapped Children and Youth produced a videotape training tool, "Disabled But Not Unable: Dispelling Myths About Disability," which has been favorably received. The center also publishes a newsletter and utilizes TV Channel 32 and the radio for outreach.

Centers for Independent Living are utilized for referral, and such centers are excellent avenues for communication of the accomplishments and needs of persons with disabilities. Staffing of these centers at the outset should represent the entire community of persons with disabilities - including Black persons with disabilities - to ensure access to services and to dissuade subtle or overt rejection behaviors.

Physical access to buildings, parking lots, and transportation systems remains a high priority item for persons with disabilities. These needs must be communicated to the appropriate agencies so that action to increase accessibility may be taken. Advocacy organizations primarily of, by, and for persons with disabilities should make every effort to include Black persons.

In the immediate social contact area for Black persons with disabilities are family, friends and the church. The church is a focus for the community. Wells and Banner (1986) found that there is a significant role for outreach, support and advocacy to be played by the Black church. The investigators found that

that by networking through this key resource, persons with disabilities and service providers could protect and ensure rights for persons with disabilities. This role for the church was enunciated at a conference for resource exchange in collaboration with the United Methodist Churches of Rome and Cedartown, Georgia, and the Howard University Model to Improve Rehabilitation Services to Minority Populations. In this important role, the church is to cooperate with and support social and vocational rehabilitation agencies. Volunteers also have meaningful roles in this support system.

While the usual job placement opportunities are being developed, the role of Black individuals with disabilities as entrepreneurs, owners and operators of small businesses should not be overlooked. Local Chambers of Commerce, Junior Achievement, trade associations, labor unions, and professional organizations should provide important linkages. Projects with industry should include advocacy for hiring Black persons with disabilities. To assure job success, corporate and company responsibility should be strongly encouraged. Nationally known fast food organizations have openings at many levels of operations; they should be encouraged to hire Black persons with disabilities.

The value of developing a substantial number of self-advocates among the Black population with disabilities cannot be overemphasized. There is a vital need to encourage larger numbers of Blacks with handicapping conditions to become active in advocacy organizations at both the local and national levels. Such individuals should become active in disability rights groups as well as in traditional civil rights groups such as the NAACP and community organizations such as the Urban League.

Primary health care providers are a growing job resource. Through their rehabilitation counselors, occupational and physical therapists, social workers, and others, clients could be provided with role models with disabilities and positive examples of the benefit of work as a desirable objective. In-house workshops should not be the limit for persons with disabilities. Many personnel administrators in healthcare could and should consider Black persons with disabilities for staff positions by creating on-the-job training opportunities. Suppliers of health care facilities should be oriented to provide job opportunities for applicants with disabilities.

Conferences, workshops, and seminars are excellent vehicles for the dissemination of information. Since 1985, Career Exploration Conferences held at Howard University for persons with disabilities have attracted at least thirty-six employers and over 200 attendees at each meeting. Such conferences are important first steps to open doors to Black persons with disabilities seeking employment, as well as for employers seeking a resource for employee recruitment.

Each rehabilitation counselor (as well as other service providers) should view him/herself as a mechanism for the communication of ideas and policies which facilitate the success of all Americans with disabilities (including Blacks and other non-Whites). Professionals should view the role of advocacy as a vital component of their job responsibility.

The assumption of personal responsibility, with appropriate supports, should be stressed as an asset in obtaining successful employment and in job maintenance. This would include periodic self-assessment, as well as the traditional evaluation by supervisors. Setting goals with timetables should reflect reality-based planning with possibilities for adjustments and revisions leading to higher level positions. Additionally, opportunities for in-service training should be part of in-house information systems. However, one should not diminish the importance of the company grapevine as an essential communication resource.

Rehabilitation and job placement for persons with disabilities is the single most successful investment that is made with the expenditure of federal dollars in the human services system. Earnings and jobs produce taxpayers and restore human dignity.

To whom shall I speak today?
People are greedy
Everyone seizes the possessions of his neighbor.
To whom shall I speak today?
Gentleness of spirit has perished.
All the people are impudent.
To whom shall I speak today?
One laughs at crimes that before
Would have enraged the righteous.
To whom shall I speak today?
There are no just men.
The earth has been given over to evil doers.

This Egyptian poem, written when the Old Kingdom was in turmoil, has the title, "The Struggle with His Soul of One Who is Tired of Life," and is quoted in Davidson, et al. (1982). It gives food for thought in a perilous world with very delicate balances designed to avoid and avert war.

When considering societal responsibility for the rehabilitation of persons with disabilities, some people see problems as challenges and rise to meet them. Others see barriers as opportunities for creative innovation. Society, in its diversity and complexity, provides no diminution nor simplification for either. Societal responsibility for the rehabilitation of persons with disabilities remains in place mainly because of the faith, perseverance, and persistence of those in both groups. We must endure. We must continue.

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VITAL LINKS IN THE REHABILITATION AND EMPLOYMENT OF BLACK AMERICANS WITH DISABILITIES: A RESPONSE

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Information, Protection, and Advocacy Center
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Abstract

This article suggests strategies for working with Black Americans with disabilities. It addresses various barriers that exist and suggests strategies for more effective rehabilitation. The author discusses the formation of the Employment Related Activities Triad. The WIN Program and self-advocacy are examples of strategies discussed. Client assistance programs are suggested as a way of bridging the communication gap between clients with disabilities and the vocational rehabilitation system. The author emphasizes the importance of reaching out to Black Americans with disabilities rather than expecting them to meet the arcane eligibility criteria that the various systems have set up. The article also highlights the unique services available through the Information, Protection, and Advocacy Center for Handicapped Individuals, Inc. of Washington, D.C.

Mrs. Anderson's paper presents an overview of the barriers existing in communication and in networking which adversely affect the rehabilitation and employment of Black Americans with disabilities. I would like to suggest some strategies that may be helpful in removing some of these barriers. As you all are aware, the District of Columbia is unique because approximately 70% of our population is Black. The barriers that confront Blacks with disabilities are, as a consequence, especially prevalent in our community.

This, however, presents positive aspects. Our organization, Information Protection and Advocacy Center for Handicapped Individuals, Inc. (IPACHI), is the only protection and advocacy system in the country representing a majority Black constituency. The District of Columbia has the only Black director of client services for its vocational rehabilitation system. It is necessary for us to lead the way in forging new methods and patterns of reaching out and providing services to our Black citizens with disabilities. Mrs. Anderson indicates that 82% of Black persons with disabilities are unemployed and that the primary source of income for this group is public assistance.

In the District of Columbia, we are attempting to meet this challenge with an innovative plan. Our agency, together with the city's Developmental Disabilities Planning Council and the Developmental Disabilities University-affiliated program operated through Georgetown University has formed the Employment-Related Activities Triad in order to implement an employment initiative for individuals with disabilities. The purpose of this plan is to provide supported employment opportunities for persons with disabilities in private sector businesses. We have received a commitment from the District's Department of Employment Services to train public assistance recipients in the WIN Program to serve as job "coaches" for persons with disabilities in supported employment. We agree with Mrs. Anderson that education, job training, and job placement are effective means of meeting the challenge of rehabilitation and employment of Black Americans with disabilities.

Our agency has been designated as the protection and advocacy system for developmentally disabled persons and mentally ill persons. We provide individual and systemic advocacy and promote self-advocacy by the training of consumers. Through our ten separate advocacy projects, our efforts affect virtually every social service agency within the District of Columbia. We are fortunate to have a city government that is sensitive to the needs of, and supportive of, the services to Black Americans with disabilities. As Mrs. Anderson pointed out in her paper, rehabilitation is a well-kept secret from the average Black American. It is also a highly misunderstood, inadequately and improperly used, social service. Recognizing this, the federal government in 1973 authorized pilot client assistance programs in order to improve the communication process and to provide mediation between clients and their vocational rehabilitation (VR) agencies. Our agency implemented a pilot program in the District of Columbia as one of the nine demonstration projects across the country. These programs were so successful that in 1984 client assistance programs were federally mandated as a requirement for each state to receive federal monies for vocational rehabilitation services.

Client assistance programs have been useful in bridging the communication gaps between persons with disabilities and the vocational rehabilitation system. They can, and must, be used more extensively to bridge the cultural gap that often exists between Black Americans with disabilities and the various state vocational rehabilitation systems. The Ross-Biggi study that Mrs. Anderson cites in her paper indicates that the predominant reason given for not making clients eligible for rehabilitation services among nonwhite clients is "failure to cooperate," while the predominant reason among White clients is "refused services." This raises disturbing questions, not the least of which concerns equal protection under the law, and possible discrimination issues.

One has to wonder why so many clients either failed to cooperate, or have refused, rehabilitation services. Focusing specifically on the so-called "uncooperative" clients, one wonders if the clients viewed required intake procedures as merely a "set of hoops" to jump through in order to reach nebulous goals. Would it have made a difference for example if the clients had the process and the need for the process fully explained to them? Or were the clients able to find the ultimate goal relevant to their immediate needs? We have found in the District that counselors must deal often with the basic needs for food, shelter, and clothing for clients before attempting to embark on long-term vocational goals or even pre-vocational activity.

In the last major revamping of vocational rehabilitation and procedures, the major focus of evaluation and services was on the individual client, his perceived strengths, weaknesses, needs and potential. This placed the major responsibility for determining the provision of services on the subjective judgment of the vocational rehabilitation counselor. Are counselors conversant enough with minority cultures to be able to communicate effectively? While the training of counselors in communicating with diverse cultures is imperative, we also know that minorities are grossly underrepresented among the ranks of vocational rehabilitation counselors. We must continue efforts to recruit, train, and retain minorities in the rehabilitation services. Clients need role models with whom they can identify. We need more racial minorities, and more minorities with disabilities represented in the professions to serve as these successful role models.

Once positive communication is established between the "client" and the service-providing systems, the following questions must be asked: Are the services currently available relevant to the needs of Black Americans with disabilities? Are the policies and procedures congruent with client needs or are they self-serving of the system?

Let me illustrate this point with an example. As you must know, the housing situation for the poor in the District of Columbia is a disgrace; the waiting list for Section 8 housing is ten years long and housing in the open market is affordable only to the reasonably affluent. It came to the attention of our office that the local rehabilitation agency was not accepting applications from persons with disabilities with no permanent address, as is the case throughout the nation. The persons who stayed temporarily with relatives or in the shelters until they could find a place they could afford, or could afford the place that they found, were caught in a vicious cycle and fell "through the cracks" of our system. It was a classic "catch 22." They were unable to get assistance to become employable and, because they were unemployed, they were unable to get a place to live or receive appropriate services. Fortunately, this particular story has a happy ending -- we were able to convince the rehabilitation agency to accept a shelter as a mailing address for some clients and found a shelter willing to serve as the mailing address for homeless clients so that they could receive SSI checks and their vocational rehabilitation mail.

Rehabilitation services also has a culture that has traditionally been geared to the working majority culture. Rehabilitation efforts grew out of a need and desire to rehabilitate veterans with physical disabilities of World War II in order to restore them to the mainstream of our American culture. The first major change in the system was to include civilians with disabilities. Then, the rehabilitation structure accepted some mentally ill persons as clients. The major mandate in 1973 prioritized persons with severe disabilities and individualized clients services. It is time for rehabilitation services to recognize the special vulnerabilities of minority persons with disabilities and to make special efforts to serve their unique needs. In order to be served effectively, those special needs will have to be clearly identified. Working conferences such as the one we are attending today are indispensable to gathering, sharing, disseminating information, and developing systematic recommendations.

I cannot too strongly state how important it is to reach out to Black clients with disabilities rather than merely expect them to know how to meet the arcane eligibility criteria that the various systems, including vocational rehabilitation, have set up. One of the basic philosophies at the Information Protection and Advocacy Center for Handicapped Individuals, Inc. is to reach out to clients at their own individual levels and to link them with the services and systems appropriate to needs; and to provide follow-up/follow-along as an integral part of the processing of each case.

As our name implies, we are best known for providing information and referral. We provide the traditional resources and referral information through our various publications. There is the Directory of Services for Handicapping Conditions, which lists all services available to persons with disabilities and their families in the Washington Metropolitan area. We publish Access Washington, a guide containing information about accessibility of recreation facilities, restaurants, and sites of interest, for persons with disabilities in the area. We also print an annual Directory of Summer Programs for children and adults with handcapping conditions. While the publication format is sufficient for professionals looking for information -- and for some consumers as well -- we find that many persons with disabilities and their families need more individualized information, either by phone or in a personal interview. We often need to find out what the client really wants to know before we can provide the answers.

For instance, we received a call from a woman who was looking for a larger home. Further conversations revealed that she was managing the extended families of her 4 retarded sisters, consisting of 24 persons, 16 of whom had disabilities, and none of whom was receiving appropriate services. We assisted this family in applying for and receiving financial benefits, obtained therapeutic recreation services for some of the children, rehabilitation services, planned parenthood counseling, and long term case management for other family members. The family did not need a larger home after all. They live in 3 homes in great proximity, but now are more independent. Each member is striving to reach his or her potential.

The ultimate goal of each individual, disabled or not, is to perform at his or her maximum potential, and the mission of IPACHI is to ensure that these individuals, and their families, obtain the services and supports necessary to help them achieve this goal. Our theme is "Information Is Power". Black Americans with disabilities need information that is empowering. They need to know that they have rights as Americans that are not diminished because they are Black or because they have disabilities, and especially not because they are both Black and disabled. It is not sufficient to tell our clients about services that they may be entitled to receive. It is crucial to ensure that individuals know about their specific rights as clients of the social service systems they use and the resources available to ensure that those rights are upheld. It is only then that they can make informed choices and begin to take control of their own lives.

COMMUNICATION AND NETWORKING: VITAL LINKS IN THE REHABILITATION AND EMPLOYMENT OF BLACK AMERICANS WITH DISABILITIES

SESSION D: SUMMARY

Recorder: Mr. John King
Hornbake Library
University of Maryland

The Challenge: To develop new directions and approaches to facilitate the success of Black persons with disabilities to the rehabilitation system.

Effective Communication Strategies:

- Information Center for Individuals with Handicaps
- Audio-visual presentations, print and electronic media campaigns directed towards Black disabled populations
- Links in a strong communication chain
- Centers for Independent Living
- The Church
- Chambers of Commerce
- Trade Associations
- Professional Associations
- Self-Advocacy
- Primary Health Care Service Providers
- Rehabilitation Service Providers
- Conferences, Workshops, and Seminars

Panelists' Presentations:

Louis Slade presented corporate America as being responsible for more than simply hiring persons with disabilities, that it must also provide training and opportunities for advancement. Efforts must be made to provide clear understandings to individuals with disabilities of what is expected of them. Further, new employees need to be linked with seasoned employees through visible suport systems to orient the employee with disabilities to written and, occasionally more importantly, unwritten procedures.

Discussion from the audience dealt with the adequacy of the level of communication between industry and training facilities relative to training goals, and rehabilitation professionals must assume some responsibility to go to

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corporate America and communicate to it what is necessary for more effective rehabilitation counseling.

Eunice Fiorito focused on the act of advocacy and the power that it can have as a communication tool. She encouraged advocacy for better education; for better training program models (e.g. a project with industry (PWI) program at this institution); for employers who take more responsiblity for training employees; for action plans; for improved interpersonal training skills; for better programs and legislation from the various levels of the federal government.

Yetta Galiber's response focused on activities that a protection and advocacy agency can be involved in that would improve the communication of the availability of rehabilitation services to Black individuals with disabilities. She reviewed an employment related triad that was training job coaches for severely developmentally disabled individuals. She emphasized the need to change rehabilitation from being an apparently well-kept secret from Black Americans. When attempting to determine why Black clients do not succeed in the rehabilitation process, we must ask if the process and the goals were clearly communicated. Effective communication to this population will be dependent on the cultural awareness of the counselors. Awareness should also be maintained that many clients need more personalized information than that provided by even the model publications of the Center (e.g. Access Washington).

The key to this session was given by Ms. Galiber:
"Information is Power." The person with disabilities must know his rights as a client and have information regarding the services to which he is entitled.

RECOMMENDATIONS

1. The corporate world and the rehabilitation world should communicate with each other on their mutual goals and needs as they reflect the needs of

Black individuals with disabilities. The initiation of this dialogue should not necessarily rely on waiting for an invitation from the corporate community, but should rather seek impulse from the active efforts of the rehabilitation community.

2. Rehabilitation, special education, and related services training programs should be mandated to seek out minority students for their programs and more adequate funding for the programs.

3. State and local advocacy and training groups need to develop action plans designed to get people with disabilities employed.

4. Attention must be given by the rehabilitation community to all congressional legislative activity that has an impact on the lives of Americans, e.g. trade legislation, and not just that related to rehabilitation and education.

5. Special education must develop a career education/work philosophy that will be reflected in the retraining of special education teachers, revision of public school special education curricula - K-12, and the changing of professional training at the undergraduate and graduate levels.

6. We must network and communicate with organizations beyond the sphere of rehabilitation and disability; so that, for example, the National Council of Negro Women will actively include the concerns of Black women with disabilities in their agenda.

7. Mainstreaming of pupils with severe disabilities into public education should be a requirement and not an option of state and local education agencies.

8. Evaluative criteria and the chronology of intervention with gifted children needs to be re-assessed.

9. There must be additional non-White professionals in rehabilitation, special education and related services.

10. Corporate America should consider the funding of training programs that are based in and operated by churches in the Black community.

11. Better service delivery will be enhanced by the hiring of more rehabilitation personnel into situations where there are more manageable caseloads.

SECTION VI.

BUILDING BRIDGES TO
ECONOMIC VIABILITY

TOWARDS ECONOMIC INDEPENDENCE: A GOAL FOR BLACK PERSONS WITH DISABILITIES IN THE UNITED STATES

SESSION E

PRESENTER: DR. SYLVIA WALKER
DIRECTOR
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HOWARD UNIVERSITY

PANELISTS: MR. CLIFFORD THORNE
FORMER EXECUTIVE DIRECTOR
D.C. CENTER FOR INDEPENDENT LIVING, INC.

MR. HENRY WILLIAMS
DIRECTOR
REHABILITATION SERVICES
CREEDMOOR PSYCHIATRIC CENTER

TOWARD ECONOMIC OPPORTUNITY AND INDEPENDENCE: A GOAL FOR MINORITY PERSONS WITH DISABILITIES

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Abstract

This paper examines factors which relate to economic independence and opportunity for Black Americans with disabilities as well as other minority persons with disabilities in the United States. The author provides (a) an overview of attitudes towards disability from a broad historical perspective; (b) insight into the impact of disability and minority status from a personal perspective; and (c) a review of socioeconomic factors as they relate to the needs of minority persons with disabilities. This paper also includes a discussion of the changing labor market in the United States and the challenge which lies ahead with regard to the fact that America will rely on persons with disabilities and members of ethnic minorities to meet its employment needs as we approach the 21st Century.

Historical Perspectives

The attitudes of a specific society at any point in its existence are a manifestation of the cumulative experiences of individuals within that society (Walker, 1978; Walker, 1984). An examination of attitudes toward persons with disabilities across cultures down through the ages suggests that attitudes towards disability have consistently relegated persons with various physical and mental impairments, to economic deprivation and dependency. Greek and Roman perceptions of disability and illness are detailed in the literature. The ancient Greeks considered the sick inferior (Barker, Wright, Meyerson and

Gonick, 1953); and in his Republic, Plato recommended that the deformed offspring of both the superior and inferior be put away in some mysterious unknown place (Goldberg & Lippman, 1974). 'During the 16th century Christians such as Luther and Calvin thought that persons with disabling conditions were possessed by evil spirits. Thus, these men, and other religious leaders of the time often subjected persons with disabilities to mental and/or physical pain as a means of exorcising the spirits (Thomas, 1957). During the 19th century, supporters of social Darwinism opposed state aid to the poor and persons with disabilities, because preserving the "unfit" could only impede the process of natural selection and damage the system whereby the "best" or "fittest" elements of society would rise to the top and the most wicked (least productive) elements would perish (Hobbs, 1973). Lukoff and Cohen (1972) speak of the blind, who were banished and/or ill treated in some places and given special privileges in others.

In comparison with the status of people with disabilities in a number of non-occidental societies, Hanks and Hanks (1948) found wide differences. Some cultures completely rejected persons with disabilities; in others they were outcasts; in some they were treated as economic liabilities, grudgingly kept alive by their families. In some cultures, those having disabilities were tolerated and were treated incidentally, whereas in a few they were given respected status and allowed participation to the full extent of their capacities (Walker, 1986a) The degree to which the various disability groups are accepted within a society is not directly proportionate to the society's financial resources and/or technical know how. Lippman (1972) observes that in many instances small European countries such as Denmark and Sweden are more accepting of persons with disabilities than the United States. He also found that these countries provide more effective rehabilitation services. The prevailing philosophy in Scandinavian countries is acceptance of social responsibility for all members of society without regard to the type or degree of disability. Although throughout the world many changes have taken place in the status and treatment of persons with disabilities, the residue of tradition and past belief still influences present day practices (DuBrow, 1965; Walker, 1984; Walker, 1986a; Wright, 1978). Thomas (1957) views social perception and treatment of persons with disabilities within and across cultural boundaries as a kaleidoscope of varying hues reflecting tolerance, hatred, love, fear, awe, reverence, and revulsion. The most consistent feature in the treatment of those with disabilities in most societies is the fact that they are categorized. "Deviance rather than being an innate characteristic of the individual is an attribute defined by society" (Lippman, 1972, p.89). As Goffman (1963) indicates, "Society established the means of categorizing persons and the complement of attributes felt to be ordinary and natural for members of these categories" (p.2). Attitudes towards disability are for the most part based upon vague and superficial impressions of exterior manifestations on the part of the persons without disabilities. Wright (1978) speaks of the phenomenon of "spread." She states that in most instances the initial response of an individual without a disability to a physically challenged individual is to place the latter in a predetermined category based on what are assumed to be his/her attributes and status as inferred from appearance. This one-dimensional approach with regard to persons with disabilities has served to constrain, restrict and perpetuate negative concepts and economic dependence. For most of the world's history, an enormous number of people with disabilities have been hidden away in attics, institutions, and/or "special programs." The labor shortage brought about by World War II provided one of the first opportunities for substantial numbers of persons with disabilities to be gainfully employed during the early 1940's.

> The first real employment breakthrough for large numbers of persons with disabilities came during World War II, when hundreds of thousands were put to work while "our boys" were overseas. By all accounts, the disabled employees performed very well. "In 1945, millions of American military men returned from active service. While many took advantage of the 'GI Bill' to go to college, large numbers resumed the jobs they had held prior to Pearl Harbor. In doing so, they displaced many women and individuals with disabilities who had been working to maintain domestic production." (President's Committee on Employment of the Handicapped, 1987)

A historical review by the President's Committee on Employment of the Handicapped (1987) documents the fact that America's priority in those postwar years was to return the jobs to veterans, not to reward people with disabilities who had performed civilian work at home. This is the way most people felt it should be. In retrospect, perhaps more should have been done to capitalize on the performance record of people with disabilities (President's Committee on Employment of the Handicapped, 1987). In 1948, a study conducted by the Bureau of Labor Statistics of the U.S. Department of Labor provided information about job performance by people with disabilities. This survey found that, on the average, workers with disabilities had fewer accidents, were absent no more often, and most important, were as productive, and at times more productive than workers without disabilities. These facts, surprising at the time, have since become common knowledge among employers, in large part because of the leadership of the President's Committee on Employment of the Handicapped (President's Committee on Employment of the Handicapped, 1987).

From a historical perspective, the evolution of legislation in the United States relative to persons with disabilities reflects three distinct social attitudes. First, are older views which considered persons with disabilities as being incompetent to take care of their own needs or incapable of full participation in life's activities. Second, is the view that such persons are capable of limited participation in some of life's activities. The corollary of these two perspectives is a limited definition of public and private responsibility to people having disabilities. Third, is the perspective that individuals with disabilities are capable of full participation in some or all of life's activities, and that a democratic society has a responsibility to establish and maintain an environment supportive of such participation (The President's Committee on Employment of the Handicapped, 1980). Since the early 1960's, concern has increased substantially for persons with mental and physical disabilities. The spirit of concern for the rights of minority groups has resulted in greater judicial and legislative sensitivity. In 1972, two federal district court cases, Pennsylvania Association for Retarded Children v. Pennsylvania and Mills v. Board of Education (Ingalls, 1978) had tremendous impact upon the status of people with disabilities in America. These court actions created the foundation for the right of all children with disabilities to a publicly supported educational program suitable to their individual needs. A fundamental presumption of the new approach to the education of children with disabilities is that placement in a regular public school class with appropriate ancillary services is preferable to placement in isolated and/or restricted environments. Reacting to the PARC and Mills decisions, federal and state governments enacted legislation which required that youngsters with disabilities be educated. These laws resulted in a dramatic reversal of decades of neglect, when compulsory education laws did not apply to children with disabilities. At the end of the 1960's only ten states had special education laws requiring special efforts to educate children with disabilities. By the end of the 1970's, all states had special education laws. One year after the Pennsylvania case, the Congress passed Section 504 of the Rehabilitation Act of 1973. This legislation established the requirement that all federally assisted programs had to be accessible to persons with disabilities. Section 504 of this Act states:

> No otherwise qualified handicapped individual in the United States...shall solely by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance or under any program or by the United States Postal Service.
>
> For purposes of Title V of the Act, the term handicapped individual means any person who "(1) has a physical or mental impairment which substantially limits one or more major life activities, (2) has a record of such an impairment, or (3) is regarded as having such an impairment." (President's Committee on Employment of the Handicapped, 1980).

The significance of Section 504 cannot be overestimated. This legislation may be viewed as an affirmative declaration that individuals desire to be educated to the fullest of their abilities and that the American society has a responsibility to integrate persons with disabilities into the mainstream of life. Education is part of the foundation for being able to earn one's living, and to enjoy and contribute to the nation's economic and cultural development. Therefore, physical accessibility is essential for people to enjoy access to educational facilities and employment opportunities.

Abeson (1974), who views legislation for those with disabilities as an evolutionary process, identified the following stages of development: (a) legislation that focuses on vocational rehabilitation as an objective (here emphasis is on extensive evaluation services); (b) legislation that encourages deinstitutionalization with the goal of independent living, homemaking, and mobility within the community; (c) the provision of services for independent living through peer counseling, small business activity, community education, and general advocacy programs; and (d) the provision of comprehensive services. This section of the paper has provided a brief overview of attitudes towards disability from a brief historical perspective. The following section contains a discussion of the impact of disability and minority status from a personal viewpoint.

THE IMPACT OF DISABILITY AND MINORITY STATUS: A PERSONAL ACCOUNT

I am legally blind. As a result of limited financial resources, it took me until I was ten to get glasses. Prior to that, I was placed in the front of the room to make sure that I could copy from the blackboard. Throughout elementary school I was classified as a slow reader. In fact, I didn't realize until I was enrolled in a master's program at Hunter College that I probably had multiple disabilities. For in addition to having a visual impairment, I had an articulation problem for which I received speech therapy. When I did get into high school, I was assigned to the general track. In the New York City school system, there was a general, commerical and academic track, the latter being for college preparation. Again, I was placed in the general track, but fortunately that program included something called "Reading Techniques." I took this sequence for one year, came out of it and went into Honors English. My guidance counselor flatly told me, "the general track is good; you could get a diploma." I thought I had more abilities than my guidance counselor credited me with, and so I succeeded in getting myself out of the general track, then enrolled in the commercial track. Although I desired to go to college, it is noteworthy that in my immediate neighborhood I was one of the few students who even managed to graduate from high school. So I prepared for a commercial existence and people were proud in my neighborhood when I got a job during high school working in Grant's Five and Ten. When I did graduate from high school, it took me ten months to get an office job in spite of the fact that I had numerous commendations, certificates of achievement, and that I was on the honor roll for at least six of the eight semesters. I saw other students who had worked with me at Grant's, finish high school, call jobs, look in the paper, go for interviews and get work. On the other hand, I vainly called employers month after month. Because these individuals couldn't tell my identity from the phone conversation, they would ask me to come down. But after they saw me, they would inform me, "The job is filled. Could you come back?" It wasn't until five years after high school that I began attending college. I couldn't matriculate in college because I did not have all the required high school credits. I had not taken algebra and geometry in high school. I went back after high school at night and took these courses simultaneously as well as Spanish. Four years passed before I matriculated at Queens College. Many people who are not categorized as disabled are certainly disabled by the kind of system that exists for many Blacks and other minority persons here in the United States. With today's scene showing such developments as Affirmative Action, an appreciable increase in educational grants from many sources, the proliferation of public-supported colleges and universities, and - by no means the least of these phenomena - the growing advocacy for implementing the rights of persons with disabilities, one can definitively say that things have improved considerably since I found myself a newly graduated high school student with a disability facing the challenge of acquiring a college education. After making the appropriate bow to modesty, I think I am still entitled to believe that it was only sheer tenacity in hanging in there, so to speak, that carried me forward through the seven years before I finally walked down the aisle to receive my bachelor's diploma. In fact, I make bold to generalize from my experience in asserting that sheer grit, the will to persevere, dogged tenacity - call it what you will - is an indispensable character resource in the psychological arsenal of anyone with a disability facing the challenge of even today's more enlightened and more considerate educational fields and career markets. I didn't even want to go on to get a master's, but teacher certification laws in New York State were changed to require the equivalent of a master's degree in order to obtain permanent certification. I said, "As soon as I learn how to play the game, they're changing the rules." And that's the way a lot of us feel, even those with a certain amount of motivation. So definitely those kinds of experiences are disabling and potentially handicapping. After I earned the master's degree, someone said, "You have potential; you ought to go on to get a doctorate." I had no yen for a doctoral degree. I'm just using my own experiences as an example of someone who must have had some kind of ability, but who in spite of many negative experiences just kept trudging along. My primary goal was to obtain a B.A. degree. I have had the unique advantage of living through some of the most exciting decades of this century from the 1940's - when I attended elementary school - to the 1980's. Many changes have occurred during this time period - the end of World War II; the Civil Rights Movement; the Disability Rights Movement and the Women's Movement. The major factors which I attribute my survival and success are the benefits of educational options, a supportive family environment and a strong spiritual life. While I have always had a visual impairment - which has become more severe over the years - I feel that the major obstacle which I had to face in earlier years was racial prejudice rather than discrimination due to the presence of a disability. The qualities or characteristics which I rely upon most are faith and persistence. In other words I'm very stubborn. I welcome a good challenge. I feel that I have been extremely fortunate to have had the combined experiences and opportunities which have been mine. A large proportion of other minority persons with disabilities live with disabilities in a context of limited education and low socioeconomic status. The average minority person with a disability in our country has an annual income of less than $4,000. This individual is likely to be unemployed. This reality makes life for minority persons with disabilities extremely difficult. This section has focused on a variety of socioeconomic issues. The next section will focus on factors relevant to the needs of minority persons with disabilities.

SOCIOECONOMIC FACTORS: IMPLICATIONS FOR MINORITY PERSONS WITH DISABILITIES

While it is true that individuals with disabilities who are members of racial and ethnic minorities suffer the same indignities as other individuals with disabilities, these ethnic minorities face special and unique problems because of socioeconomic factors. In addition, prejudice and discrimination continue to exclude a great number of minority persons from full participation in all aspects of society. However, relatively little research has been conducted in order to a) examine specific variables; b) document problem and success areas; or c) identify effective strategies relative to the vocational rehabilitation and transition from school to work for minority youth.

Research has demonstrated the overwhelming disparity between the socioeconomic status of minority group members and White Americans. Income is a major yardstick of the economic independence potential of Blacks and other non-White persons who have been influenced by the work experience patterns of family members (Current Population Survey, 1981) and by general discriminatory practices in the work force. Income trends have shown that the poverty rate for minority families has consistently been higher than that of their White counterparts. Current Population Survey (CPS, 1985) revealed the vast contrasts in income levels for White Americans, Black Americans and Americans of Hispanic descent.

1985 HOUSEHOLD INCOME LEVELS

The poverty rate for Blacks (31.37%) and Hispanics (29.0%) is almost three times as high as it is among Whites in America. Data concerning poverty rates are consistent across all age groups. Harriet McAdoo's demographic study shows that "single mothers increased during the 1970's from 8% to 12% for Whites and from 22% to 39% for Blacks. In 1980 one-half the Black families with children were one parent families..." (McAdoo, 1982). Consequently, these Black youths grew up with the pressures of double minority discrimination. The staggering reality is that Blacks and other minority persons are likely to remain at an economic disadvantage for some time yet. Census figures show that unemployment rates for Hispanics, Native Americans and Blacks are consistently above the unemployment rate of the overall population (Current Population Survey, 1986).

The current Bureau of Census figures show that in many urban areas the unemployment rate for minority persons is at least twice as high as it is for Whites. Thus, many minority persons become caught in the dilemma of having to rely upon public assistance. Anti-poverty programs are viewed by many Americans as poverty maintenance programs since in real terms the amount of assistance given is just enough for the survival from life threatening conditions (Lewis, 1978). Low socioeconomic status is itself debilitating. Dependence upon anti-poverty programs is often further stigmatizing. In addition, Hispanic and Native American employment tends to gravitate towards lower status unskilled jobs in agriculture and service occupations. A 1982 study by McAdoo notes that Hispanics (the fastest growing ethnic group in America) have taken over many service jobs that were traditionally held by Blacks (McAdoo, 1982, p. 19). Given this bleak economic outlook and the fact that a large proportion of Blacks have low incomes and are just barely able to survive, the impact on the family unit of an individual with a disability presents a formidable problem.

Jacobs (1987) makes the point that the buying power of Blacks and many other minority persons has diminished in real terms during the 1980's. The high costs of care, medication and/or aids (such as a wheelchair) to assist the individual with a disability to gain any degree of independence frequently cannot be afforded. This creates the necessity for a greater degree of public assistance to the family of the Black person with a disability. The absence of supportive aids further limits the learning power of the family of a minority individual with a disability.

The Black and Hispanic adult who becomes disabled frequently finds that his/her job is not accessible, especially if it is in an old section of the community where the barriers to access are the most numerous. If this individual is the head of household, then the entire economic structure of the family is destroyed. This individual minority adult is frequently unable to become totally integrated into community life because his/her range of mobility in the community is restricted. The community labels him/her as inferior and does not provide for his/her free access to education or ways for him/her to develop socially and culturally. Unfortunately, this situation of isolation has serious ramifications for self-concept and educational achievement.

Michael Lewis (1978) discusses the "culture of inequality" - a concept germane to problems of poverty and failures which are viewed by many Americans as the ultimate in personal worthlessness. Because poverty is all too often synonymous with minority group status, this situation threatens a person's sense of self-worth and forces him/her into a demeaning struggle against a specter of denigration. These complex social conditions threaten minority persons in general, and the minority individual with a disability in particular, with gross despair and inordinate stress (Walker, 1982).

In spite of the critical needs identified above, relatively few research activities have focused specifically on the unique characteristics and needs of the culturally diverse and economically disadvantaged disabled populations during the past ten (10) years. Disability is disproportionately represented among minority groups and the economically disadvantaged:

> The 1981 Bureau of the Census data showed that out of 22.6 million Americans with some significant disability (aged 16-64), 4.6 million or (one-sixth) are non-Whites. Proportionately, minority persons with disabilities outnumber their White counterparts two to one. The non-White Americans with disabilities are generally older, unemployed and those who are employed have an average income of less than $3,000 per annum. They are more likely to work in service oriented occupations which demand greater health hazards and risks (Bowe, 1985).

The large number of Black Americans between the ages of 16 and 64 with physical, mental, and social disabilities represents a large segment of the disabled population in the United States. Bowe (1985) gives the following profile of this group:

- One working-age Black adult in every seven (or 14.1%) suffers from at least one serious disability.
- The average Black adult with a disability is 42 years old, has less than a high school level of education, does not work, nor is actively seeking employment. Income from all sources was under $3,000 in 1980.
- Almost half (47%) of all working-age Black adults with disabilities live with incomes below the poverty line. This is largely attributable to the fact that only one in every six (16.4%) works. The unemployment rate in March 1982 among Blacks with disabilities of working age was 26.5%.

Also, according to Bowe, of those Black Americans with disabilities participating in the labor force by working or seeking employment, "almost three quarters found jobs." According to Bowe (1985), one working-age Hispanic adult in every twelve has a disability. Of 8,325,000 Hispanics between the ages of 16 and 64 who are not in institutions, 702,000, or 8.4% have a disability. The average Hispanic with a disability has a ninth grade level of education, and is unemployed. The average income for a person of Hispanic descent with a disability is $3,500.

Most Hispanics of working age with disabilities are women. This is true, in large part, because women outnumber men in the general working age Hispanic population by 52% to 48%. A total of 372,000 Hispanics with disabilities, or 53%, are female, while 330,000, or 47% are male. More than (82.6%), of all Hispanics reside in cities; of these, almost two in three live in central city areas. About four in ten (38.8%) live in the western part of the country, with another three in ten (30.2%) in the South. Half (50.4%) are married, while 23.8% never married.

Prior research conducted at Howard University relative to the frequency, distribution, and impact of various disabilities among Black Americans identified the following high incident disabilities: mental retardation, blindness, sickle cell anemia, orthopedic impairment, substance abuse, and cardiovascular disease.

A number of studies have examined the status of minority persons with disabilities in the rehabilitation system (Atkins, 1978, 1986; Lawrence Johnson Associates, 1984; Walker, 1986b). Research conducted by Atkins (1978) compared Blacks with Whites using closure data from all the states and territories participating in the public rehabilitation program. Findings revealed unequal treatment of Blacks in all major dimensions of the public vocational rehabilitation process. For example, a larger percentage of Black applicants were not accepted for services; of the applicants accepted for services, the Black cases closed as "successfully rehabilitated" were more likely than Whites to be in the lower income levels. Black rehabilitants were provided less training and education even though their needs were greater because of lower pre-service education levels.

These inequalities were found to exist throughout all regions of the country. Implications for vocational rehabilitation program remediation are suggested here and in the studies conducted by Atkins (1986) and Walker (1986b). Other inequalities include: that Black applicants were less likely to be accepted than Whites for vocational rehabilitation (VR) services; therefore, more Blacks would be screened out without VR services; those Blacks consequently received less VR educational services, training, and financial aid for colleges, universities, business schools and vocational schools.

The Lawrence Johnson Associates (1984) findings suggest that even though minority clients in general agencies may experience immediate positive outcomes as the result of VR (i.e., they find a job via VR), in the long run, majority clients in both general and blind agencies seem to realize the more favorable outcomes (i.e., they reported as having a job when surveyed after case closure). This may be due to the barriers to assisting minorities who were reported by counselors (i.e., barriers such as discrimination and economic conditions). It could be that because of limited work and educational experience, minority clients may rely to a greater extent than majority clients on getting jobs via VR. But after case closure, these same - factors along with barriers such as discrimination and economic conditions - may deprive minority clients of continued employment. When individuals with disabilities are seeking a job and VR and job status after case closure are used as evaluative criteria, minorities in blind agencies represent a special population for attention. (Note: in the present study, clients in blind agencies were purposely oversampled to study these issues. Their visual impairment probably represents an additional barrier to improving outcomes).

The Ross and Biggi (1986) New York State study focused on two rehabilitation processes: entering and exiting. This study also found that 45% of the New York State working age persons with disabilities are non-Whites. However, by contrast, a review revealed the following: participation, 79% were Whites, 13% Blacks, and 9% Hispanics. This suggests that there is a considerable inadequate outreach to non-Whites, hence a lower yield of successful rehabilitation closures. While the placement rates and rehabilitation rates for Whites are increasing, those of non-Whites are decreasing. Also, while the competitive placement rates for Whites are increasing, those of non-Whites are decreasing.

In spite of the fact that minority persons are twice as likely than their White counterparts to have a disability (Bowe, 1985), they are underrepresented in the rehabilitation system. The research which has been conducted relative to access to rehabilitative services by non-White persons with disabilities supports the above findings (Atkins, 1986; Walker, 1986b). A comparative study conducted by Walker (1986b) revealed that even in urban settings heavily populated by Blacks and other minority groups these ethnic groups were underrepresented in eight geographical areas by two to one.

Henderson and Bryan (1984) have delineated a number of principles that professionals need to adopt in order to best serve ethnic minorities and persons with disabilities. Several critical ones include the following:

- Obtain a knowledge about ethnic minorities so that adequate awareness of unique cultural differences can be realized.
- Develop an awareness of the theories that prescribe or limit the potential of ethnic minority persons with disabilities.
- Recognize the various forms of oppression and how these interact with racism and handicapism.

This section provided a discussion of the impact of disability among minority persons. It also reviewed studies which have focused on problems encountered in the rehabilitation of non-White persons with disabilities. The next section will examine current and future challenges as they relate to employment and economic independence of minority persons with disabilities.

Toward Economic Independence: Present and Future Challenges

Despite the evolution of attitudes toward disability and the passage of legislation, there remains considerable contrast in the level of employment of the persons with disabilities and those without disabilities. The President's Committee on Employment of the Handicapped (1987) provided an interesting synopsis of the contrasts between past and present employment practices in America. America's job market is changing both rapidly and dramatically. In the 1920's, 12,500,000 people worked on farms; today, just 3,750,000 work in that capacity. Ten years ago, 1,139,000 workers were engaged in making steel and other metal products; today, 300,000 fewer are employed in this industry. By contrast, in 1970, 14,770,000 Americans were managers or professionals; by 1980, 22,653,000 were employed in this category, reflecting a 50% increase in just a ten year period. During this same ten year period, growth among personnel managers was a staggering 340% (from 65,000 to 220,000); among architects and urban planners, the increase was 100%; and among executives and other managers, the increase was 75%.

Twenty years ago, most construction was in the area of factories, warehouses, and assembly plants. There were understandable physical obstacles facing people with disabilities looking for work in such buildings--most jobs involved heavy lifting, fine motor control activities, and a great deal of moving around. In addition, there was danger for people who were deaf, blind, or epileptic, because machines and other heavy equipment could cause them to be easily injured on the job. Today, however, 70% of all jobs in the United States are service jobs; furthermore, 35% are information positions. In the nineteen eighties very few buildings under construction are factories, instead by contrast, buildings under construction are largely office facilities. We have slashed agricultural employment to single-digit levels (approximately 3% of all employees presently work on farms). Also, we have exported to other countries many hundreds of thousands of manufacturing jobs. The fastest growing employment opportunities in the 1980's are in sales and telemarketing, health care, financial services, leisure and travel services, and information collection and interpretation. These jobs involve much less risk of accident or injury to workers. Furthermore, regulation of workplace safety is greatly improved over what we have known in the past (President's Committee on Employment of the Handicapped, 1987). In addition to the dramatic changes in the types of employment opportunities available today, Smith (1986) cites the inconsistency between the types of available college graduates and the demands/needs of the job market:

> Approximately 29 percent of the offers made to college graduates in on-campus programs are being made to graduates of business schools. They comprise approximately 22.6 percent of the total graduating class of the university system. Approximately 13 percent of the offers are being made to majors in the various sciences. They comprise approximately 16 percent of the graduating class. Two percent of the offers are being made to engineering graduates. They comprise 8.4 percent of the graduating class. Only 6 percent of the offers are going to graduates in the humanities and social science areas. They comprise 30 percent of the graduating class (Smith, p. 75).

In it's publication: Out of the Job Market: A National Crisis, The President's Committee on Employment of the Handicapped gave examples of the fact that in many instances disability does not limit or impede the functioning and/or job performance. It should be noted that one of the most amazing changes of the 1980's with respect to the possibility for gainful employment by persons with disabilities is the emergence of high technology equipment and software that literally do what some disabilities prevent a worker from doing. Many thousands of people who are blind have been told over the years that they cannot be employed because they allegedly could not keep up with the paperwork. Today, we have the following aids readily available:

- Scanners, that "read" reports, letters and other documents as readily as eight pages per minute and automatically enter text into a word processor or microcomputer. That is faster than most sighted people can read and far faster than any clerk typist can type.

- Speech synthesizers, that "speak" out loud whatever words are on the screens of word processors or microcomputers. Many blind people listen to these synthesizers at a speed of 350 words per minute, or twice as fast as most people talk.

- Braille printers, that work with word processors or microcomputers to automatically translate into Braille virtually any textual information. Individuals who are blind not only can "keep up with the paperwork," but actually can do so as fast as most sighted people. Significant problems remain: costs are often high, speech synthesizers won't work with some software programs, and the trend toward more graphics and "loons" on computer screens creates difficulties for many individuals who are blind (President's Committee on Employment of the Handicapped, 1987).

The minority individual with a disability is least likely to have knowledge of or access to the benefits of new technologies. Therefore, the implementation of assessment, training and dissemination activities is essential in order to close this gap. The expanded utilization of technology by minority persons with disabilities will expand their capabilities and render them more likely to be successfully employed.

Research conducted by the Hudson Institute (1987) revealed several startling trends in regard to the American workforce as we approach the year 2000. In adddition to the fact that there will be new changes or developments in technology, international competition, demography, and other factors which will change the nation's economic and social landscape, the following trends were cited by the Hudson Institute Report (1987):

- The population and the workforce will grow more slowly.

- The average size of the workforce and the population will rise and the pool of young workers entering the labor market will shrink.
- More women will enter the workforce.
- Immigrants will represent the largest share of the increase in the population and the workforce since the First World War (a projected 600,000 legal and illegal immigrants).
- Minorities will be a larger share of new entrants into the labor-force. It is projected that by the year 2000 this trend will double.

In spite of the potential for increased employment, it must be noted that Hispanics and many other recently arriving immigrants are disproportionately represented at the lower end of the economic spectrum and among unemployed persons with disabilities. By contrast the new jobs will demand much higher skill levels than the jobs of today. Very few jobs will be created for those who cannot read, follow instructions and use mathematics.

In America today, about 118,000,000 people between the ages of 16 and 64 are employed on either a full or part-time basis. Thus, most Americans between the ages of 16 and 64 work. The picture for persons with disabilities in the same age group is quite different. Of America's working-age individuals with disabilities, only 4,366,000 worked full or part time in 1984. That is 12% of all Americans with disabilities, and 35% of the 13,000,000 persons with disabilities of working age. Most people with disabilities between the ages of 16 and 64 don't work. The situation for minority individuals with disabilities is even bleaker. In a study conducted by Walker (1986c) 82% of these individuals were found to be unemployed. A recent article in Fortune focused on the wasted resources and potential of Black Americans (Magnet, 1987). There are a number of parallels between the plight of the economically disadvantaged, minorities and disability groups in our country. Individuals in all of the groups are untapped resources which may be marshalled to help solve and meet the challenge of the 21st century. Currently 67% of persons with disabilities are unemployed; in 1984, 58% were in this category. The proportion of working age women with disabilities who worked full or part-time, year round or part-year jobs was only 29%. In fact, only three in every ten working-age males with disabilities and two in every ten working age females with disabilities had full-time jobs (President's Committee on Employment of the Handicapped, 1987). Today, people with disabilities (including those who are members of minority groups) ask for the opportunity to be recognized as human beings who have the capacity to love, to share, to create, to work, to live fruitful personal lives, and to contribute to society. The challenge for America is to provide the environment for all persons with disabilities to do so. The development and implementation of appropriate, relevant and creative approaches to rehabilitation is a good beginning.

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EFFECTIVE APPROACHES TO EDUCATION AND ECONOMIC INDEPENDENCE FOR BLACK AMERICANS WITH DISABILITIES: A RESPONSE

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Abstract

Cognizant of the double challenge that faces Black persons with disabilities - the challenge of being a member of a racial minority in America and having disabilities - the author makes the following suggestions aimed at improving their education and economic status: (a) that every American must be educated to understand that persons with disabilities have the same potentials and talents as non-disabled individuals, and (b) that all public school systems must set new and exciting goals based on equality of opportunity and encouragement of all to reach their optimum level of education and skills training.

The history of Black Americans presents a picture of a race of people rising from the depths of human, social, economic and political deprivation and unjustness, to a resurgence of a cultural and spiritual pride which are the main ingredients of a just society. The effects of a post-slavery society have dogged the struggle for social economic and political justice, but they have given strength to the Black race to find ways in the journey to equality of opportunities for all people in America.

One of the most important and effective strategies enacted against Black Americans is the deliberate and constructive manipulation of the education system. This system was founded on the outrageous premise that Blacks were inferior intellectually; and so they were only trainable for low class jobs which were the labor intensive activities of an unfair economic system designed to keep the Blacks poor and the Whites rich, and in political social and economic dominance. However, the attainments, initiatives and achievements of untold numbers of Blacks nailed the falsehood of that premise.

All the other negatives which include racism, political dominance and economic strategies have failed. Today Black Americans have placed themselves in a position to engage in the final battles for equality using intelligence, experience, education and precepts and tenets of human and civil rights victories. Problems are now regarded as challenges and they are approached through well-planned action, backed by dedication and commitment. The challenges are complex and numerous, and so the efforts to overcome them must match qualitatively those complexities.

The challenges confront all Black Americans, both able-bodied and those with disabilities. The Blacks with disabilities population, however, must face, in addition, the challenges of their disabilities. The solutions to these challenges in the past, were reflected by acts of charity, sympathy, rejection and condescension which together formed a stereotype of unfit, unable, uneducable and unacceptable in the fields of employment.

Strategies for the implementation of the conditions must be designed to deal with two constituents.

- o Those who are out of school and in need of employment today.
- o Those who are in school and are being prepared to face the socioeconomic realities of living in the communities.

Every segment of the American society must be educated to understand that Black Americans with disabilities have talents and potential for skills and intellectual development which would enhance their abilities to achieve levels of social and economic worth. Government, industrial, commercial and other organizations must be encouraged to recruit, train and give opportunities for this segment of society. Educational institutions must take the leadership in developing programs, services, facilities and motivation for Black Americans with disabilities.

All public school systems must set new and exciting goals based on the philosophy of equality of opportunities and the encouragement for each individual able-bodied and those with disabilities to reach the optimum level of educational and skills training. Educators, teachers, health professionals, social workers and community leaders must become the champions of change--opening windows and doors of opportunities for those whose lives require only encouragement and stimulation in order for them to truly *live* instead of *exist* in a just society.

TOWARDS ECONOMIC INDEPENDENCE: A GOAL FOR BLACK PERSONS WITH DISABILITIES IN THE UNITED STATES

SESSION E: SUMMARY

Recorder: Ms. Alma M. Banner
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Presenters focused on many of the built-in disincentives and barriers within the rehabilitation system and society as a whole, which impede Black clients' movement into status 26. Some of these barriers or disincentives were:

1. Institutionalized racism
2. Low expectation syndrome on the part of White and Black counselors with regards to the abilities of minority clients
3. Funneling Black clients into minimum wage jobs which lack upward mobility
4. Lack of supportive services such as, childcare and ongoing counseling
5. Loss of medical benefits when one obtains employment
6. Inappropriate housing - often housing is not barrier-free, or young persons with disabilities are placed in incompatible living arrangements in a senior citizens building
7. Blacks often have secondary disabilities which compound the severity of their primary disability
8. Mislabeling or misdiagnosed disability in special education which impacts negatively upon rehabilitation efforts during the transitional period from school to work
9. Black clients are not afforded diverse opportunities that will enable them to reach out and express their feelings and desires appropriately
10. High rate of illiteracy among Black clients
11. While disability among Blacks is more severe, the type and quality of related service, that is, occupational therapy, personal care attendants, transportation, etc., is disproportionately low

Practical strategies leading towards possible resolutions were provided. However, it was the mutual agreement of the group that these strategies needed to be implemented on a consistent basis and reevaluated periodically for their effectiveness. This reevaluation is seen as essential, given that the traditional structure of the rehabilitation system is inconsistent with the mosaic needs of the Black client with disabilities today. The overall profile of the Black client has rapidly changed over the years; and, in many cases, the picture is bleaker than the one Frank Bowe described.

A typical mentally ill client today is seen in the trenches of the rehabilitation system. He is younger (18-19), homeless, less educated, has never been in the labor force, is functionally illiterate, in poor health, lacks daily living skills, has inadequate nutrition, little or no vocational skills, and also has secondary disabilities such as epilepsy, diabetes, or substance abuse. Furthermore, he often has poor interpersonal skills, and may be bored by traditional shelter workshop experiences. Oftentimes these individuals' only experience with the world of work has been in what Mr. Williams called "the underground labor force" (street vendors, peddlers of illicit drugs, stolen goods, etc.). Services to these individuals are often complicated by the fact that many of the mentally ill are also substance abusers. In the delivery of services, entrance criteria is a barrier to rehabilitation. Psychiatric programs will often deny them services because of their substance abuse and substance abuse programs will reject them because of their mental illness. Some of the solutions presented were as follows:

1. Establish an Upward Bound Program focused on retraining.
2. Establish Adult Literacy Programs on the job.
3. Review criteria for medical benefits and social security.
4. Service Providers need to network with public and private sector to

identify employers' needs and establish training opportunities for clients to fill in those gaps.

5. The idea of supportive personnel placed on the job to interpret conflicting situations with clients needs to be seriously considered.

6. Rehabilitation systems need to reevaluate the five-week evaluation period. If transition from special education to work is appropriately done, these evalaution periods could be lessened.

7. Employ evaluation methods that are culturally diverse.

8. The Small Business Administration should be utilized to set up entrepreneurial efforts.

9. Partnerships between persons with disabilities and the nondisabled should be studied carefully in terms of establishing corporations (target temporary employment ventures or service oriented business).

10. The laws and rights of people with disabilities need to be advocated. (Consumers need to be advised of their rights in Title VI, Title IX, Section 504, and encouraged to file complaints).

11. More individuals with disabilities need to be encouraged and recruited to be V.R. counselors.

12. Service providers need to share information across disciplines to increase Black persons with disabilities chances of being able to take advantage of various programs and opportunities when they become available.

13. We could learn from the corporation models designed by European countries which foster self-employment.

14. We need to utilize strategies that will help transform short term need for gratification into long-term goal orientation.

15. Strategies need to be employed which will look at and evaluate the quality of job performance of service providers (counselors).

Comments:

1. Incentives such as a plan of self-support and social security insurance need more consideration.

2. A study should be conducted to look at the amount of Office of Vocational Rehabilitation (OVR) dollars spent on Black clients for college education versus White clients.

3. Administrators need to support and encourage creative employees.

4. Persons with disabilities should be taught how to use "people power" to their advantage.

SECTION VII.

BUILDING BRIDGES TO POSITIVE MEDIA PORTRAYAL

MEDIA PORTRAYAL OF AMERICANS WITH DISABILITIES: STEPPING STONES OR STUMBLING BLOCKS?

SESSION F

PRESENTER:	DR. SUSHILA KAPUR PSYCHOLOGIST D.C REHABILITATION SERVICES, DHS
PANELISTS:	MR. ROBERT H. RUFFNER DIRECTOR PUBLIC AFFAIRS OFFICE THE PRESIDENT'S COMMITTEE ON EMPLOYMENT OF PEOPLE WITH DISABILITIES
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MEDIA PORTRAYAL OF BLACK AMERICANS WITH DISABILITIES: STEPPING STONES OR STUMBLING BLOCKS?

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Abstract

This article presents an overview of the portrayal of Black Americans with disabilities in the media. The authors document the fact that non-White persons with disabilities are frequently portrayed in a negative light in the media. This serves as a stumbling block to the attainment of full potentialities of minority persons with disabilities. This paper also reviews current research on the depiction of disability, public attitude and opinion and traces their origin to classical and modern literature. After presenting the current studies and their findings of the individuals with disabilities, and the trends in the media, the authors conclude by offering a list of suggestions and recommendations aimed at facilitating the portrayal of positive images of Black Americans with disabilities.

This article reviews in general the images of Americans with disabilities, primarily in print and visual media, and their implications for the portrayal of Black Americans with disabilities. Research pertaining to the depiction of disability, public attitude and opinion regarding it and its origins in classical and modern literature, are reviewed. Current findings in developments in the perceptions of people with disabilities and trends in the media are presented. Suggestions and recommendations are offered.

"Drugs, Crime, Illegitimacy, Welfare, and Failure; all of these imprison five million citizens. But some imaginative policies can liberate them." This was the subheading of a Special Report, entitled, "America's Underclass: What to do?" in a recent issue of Fortune (Magnet, 1987). While the title of the report suggests inclusion of individuals from different ethnic groups living in America's center cities, the primary focus of the article is the Black underclass. All the photographs in the article are of Blacks in helpless and vulnerable situations, involved in drugs, crime, etc., portraying images of failure. Such graphic presentations, along with the media's slant in portraying the Black community as poor, illiterate, unprepared to assume the responsibilities of the adult world and concentrated in large urban areas, perpetuate the negative image of this entire community. This type of imaging has had a spread effect beyond the shores of the North American continent and has led to international incidents such as the recent comment by the Japanese Prime Minister to the effect that America's low productivity, noncompetitiveness and staggering trade deficits are a product of the limitations of a heterogeneous society in which Blacks and other minorities do not measure up. With such a mindset at both the national and international levels, it is no wonder that the perception about the Black community is so negative and that many comments on their successes are tinged with references to origins in the ghetto, welfare or other such derogatory allusions.

Television, radio, daily newspapers, and other audio visual and print media are an integral part of our everyday lives. They are the medium through which we get the message, any message, regarding events around the world, technological advancements, relevant social and political changes at home and abroad. Yet, the media does more than just inform us. "It provides the basis for our opinions, about what is important and what is not. The most significant aspect of the media is its skill in forming public opinion." (Ruffner, 1984)

Individual and public opinion is derived from aggregates of societal attitudes about issues and concerns regarding ourselves and other people.

Societal attitudes have been defined by Liebert (1975) as, "a general orientation towards ourselves or other individuals or groups." Attitudes begin to form early in life through interaction and experiences with the environment. Experience provides the basis for the perception of existing attitudes and the baseline tendency to conform to or reject them. Liebert, again, suggests that children learn about existing attitudes through multiple modeling and observational learning and incorporate them (attitudes) into their behavioral patterns. Since television and other media provide information on the existing beliefs and attitudes, they become catalysts for public opinion.

Attitudes towards persons with disabilities are predominantly negative throughout all facets of our society (Elliott and Byrd, 1982). Roeher (1961) pointed out that attitudes toward a specific group determine the treatment given the individual from that group and that treatment will influence the personality development of the person. Thus, "normal treatment... produces normal personality, exceptional treatment, exceptional personality" (p. 6). Negative attitudes about persons with disabilities are communicated through avoidance, over protectiveness, pity, segregation, alienation and rejection. These attitudes affect people with disabilities negatively and culminate in their feelings of embarrassment, self-pity, self-consciousness, dependency, apathy, lack of motivation to achieve, and lowered self-image (Lombana, 1980; Roeher, 1961).

Individuals with disabilities, Blacks and other minorities share many commonalities. Gliedman and Roth (1980) described persons with disabilities as, the "Unexpected Minority." They compared the isolation and discrimination experienced by people with disabilities with that of other minority groups and pointed out the similarities of racism and prejudice in the treatment they received from the non-disabled persons. The investigators stated that "the able-bodied person sees that people with disabilities rarely hold good jobs, become culture heroes, or are visible members of the community and concludes that this is 'proof' that they cannot hold their own in society" (p. 22). A review of literature by Siller (1976) further substantiates this view. The author states that, "the status of people with disabilities is low and negatively tinged" (p. 476). Ruffner (1978) echoes this thinking and states:

> "Black Americans and Americans with disabilities share common qualities. They are discriminated against by society at large. They are poorer than the average American. They are often segregated in housing, employment, education and other areas. They are perceived by the general public as 'different'."

This "difference" of individuals with disabilities and their subsequent isolation is clearly outlined by Cassie (1984) who states, "The visibly different are not all physically handicapped but may be handicapped socially by their difference from the norm in size, facial appearance, speech or age. In some ways the social mainstreaming is more difficult than physical mainstreaming, for no special provisions are made for those with birthmarks, scars, keloids or for those who stutter, or cannot remember words, those who are overweight, short or tall. Society has not been made sensitive to those who are visibly different for they have no group, no spokesperson... they fend for themselves, often feeling embarrassed, ashamed, and inferior." Certainly this statement would hold true for Black Americans with disabilities as their visible "difference" translates two-fold: the skin color and the disability.

Fiorito and Doherty (1986) state, "Being Black in the United States is still a disadvantage. Having a disability is also a disadvantage. Being Black and having a disability puts a person in double jeopardy and unlike the popular game show, this condition lasts a lot longer than a few money making moments." Similar sentiments were echoed by Wright (1960) who observed that minorities and persons with disabilities are restricted because of society's prejudicial attitudes. In a later film, These Are Good People (undated), a White paraplegic, after encountering many obstacles with discrimination and prejudice asks, "I wonder what it is like to be Black and disabled?" (in Jenkins & Amos, 1983)

The media portrayal of Black Americans with disabilities is certainly minimal. It has barely begun to cross racial barriers but is now, presenting Blacks as positive role models in The Cosby Show, 227, Dynasty, etc. Black actors are being presented as doctors, lawyers, entrepreneurs, successful students, etc. Black individuals are featured in commercials and not just endorsing fast-food chains but also reputed brokerage firms (Bill Cosby for E.F. Hutton) and high technological products. These portrayals are certainly different from the images of poverty, illiteracy, criminality and mental illness, etc., which are featured in most news stories and articles such as the one cited in the beginning of this paper. However, the negative images of Blacks still outnumber the positive in the media.

Disability, Evil, Criminality

Negative and stereotypical portrayal of disability is not unique in the American media, nor is it a novel phenomenon. Most of what is depicted in the entertainment media is modeled after the presentations of disability in classical and modern literature. Disability and persons with handicapping conditions have long been portrayed in literary works. The psychological and/or character flaw as presented in literature is fairly common. In addition, disability is frequently associated with evil and criminality on the premise that "visible defects give insights into the moral defects" and the Judeo-Christian ethic that "physical defect is a just compensation for sin." On the other extreme, disability associated with goodness is based on the premise that "suffering and misfortune make a better person." On the evil end, Melville's Captain Ahab has a wooden leg and is depicted as a mad captain of the ship; Shakespeare's Richard III, hunchbacked, murdered his way to the throne of England; Macbeth constantly questioned his emotional stability; Oedipus, born with a clubfoot was blinded for his sin of killing his father and marrying his mother; D.H. Lawrence's Lady Chatterly could not touch or be touched by her paraplegic husband, who had no soul. In Greek mythology similar images prevail, e.g. Vulcan, the fire god had shriveled legs, Cyclops who had one eye and insatiable hunger was blinded by Odysseus (Elliott and Byrd, 1982). In contrast Quasimodo, the hunchback of Notre Dame, was noted for his goodness in the Phantom of the Opera (Longmore, 1987; Thurer, 1980).

Children's literature also abounds in such themes. For example, the wicked Captain Hook and his prosthetic device, Pinocchio and his growing nose and Long John Silver and his wooden leg. Weinberg and Santana (1978) studied the portrayal of disability in comic books. They found that 57 percent of the characters with some form of disability were portrayed as villains and 43 percent were heroes. None of the characters with disabilities had neutral status (Kokasa, 1984).

Television and screen writers have taken their themes regarding disability from the classical and modern literary works. Thus, in keeping with the portrayals of characters with disabilities in literature, they write the story focusing on the disability and present it as the main ingredient. As a result, the human aspect of the character is relegated to the background and the disability becomes the issue. This leads to the portrayal of the individual with disability in "unidimensional" terms. They are generally characterized as single, unemployed, objects of ridicule and fear, pity and as needing care. Furthermore, in terms of their personality traits the characters generally depicted are dull, selfish, submissive and lacking in "cultural values" (Leonard, 1978).

Disability and Realism

The portrayal of disability in the media also lacks realism from the perspective of a person with a disability (Byrd, 1979). Depictions of paraplegia in Ironside, blindness in Mr. Sunshine, and aputation in The Fugitive were not real enough from the point of view of those who have disabilities in real life. They were good for ratings; but, because the roles were played by able-bodied actors, they lacked the depth and understanding of the conditions involved. There is some improvement in this area in recent years. Geri Jewell, an actress with cerebral palsy who has regularly portrayed cousin Geri on NBC's Facts of Life, and the quadriplegic attorney in NBC's Highway to Heaven (1985) are a few examples of this changing trend.

Impact of Media Portrayal of Disability

Apart from the portrayal of disability by the media being unrealistic, excessive depiction of certain disabilities causes more damage than assistance (Wall, 1978). For example, the portrayal of people who are mentally ill, with the single-minded focus on bizarre behavior and symptoms, can have serious implications for mainstreaming emotionally disturbed individuals. Effective psychotrophic drugs and gradual deinstitutionalization can help a significant percentage of persons with mental illness to lead productive lives. Yet, the public's perception and preconceived attitudes as projected by the media create considerable barriers to this effort. There is so much reluctance in many communities towards the establishment of group homes in their neighborhoods for people who have had mental illness. The same holds true regarding group homes for people who are mentally retarded.

Similar damage is done by negative portrayals of disability in telethons and fund raisers. While such media events raise considerable amounts of money, they foster images of hopelessness and total dependency of those for whom the funds are being raised. Lattin (1977) comments on the emotional appeal which humiliates many individuals with disabilities. The presentations which urge aid to those living "hopeless" lives do not project accurate information. Ruffner (1984) states that the media, and the public through it, tend to emphasize need and dependency, pity and charity. In some cultures, the role of the person with a disability is that of a beggar, and this role fulfills the need on the part of religions to give alms to the poor. Whatever form it takes, the charity mentality affects all countries, for it is seen as necessary to project disability as a need meriting government and private support.

Some organizatons, such as the United Cerebral Palsy Association and the Diabetes Association, have made concerted efforts to provide more accurate information and censor negative terminology in the media. The United Cerebral Palsy Association has also attempted to direct attention to the advocacy role of the organization and emphasize strengths of those with cerebral palsy along with their limitations. Some monetary appeals outside the telethons have highlighted successful individuals with disabilities (McNally, 1977). These presentations have been more balanced and highly successful in raising funds, e.g. The Diabetes Foundation. Such events cost less to produce and, hence, leave more money for the purposes for which is intended.

Conclusion and Recommendation

In conclusion, public opinion and attitudes about people with disabilities and Blacks are negative. The Civil Rights Act of 1964 addressed the racial issue and mandated equal rights to all Americans, regardless of race and national origin. The law could not mandate a "change in attitudes of the public" at large. That could change only with different types of confrontations, exposure to Black individuals, record of successes from the Black community, etc. All this does not by any means imply that racism has been eradicated. However, opportunities have opened up as a result of the legislation, media portrayals and exposure. Legislation mandating equal treatment under the law, regardless of disabling conditions, has culminated in some changes in educational policy. The same has not always held true for people with disabilities in employment, housing, etc. This is definitely mirrored in the media.

The title of this paper "Media Portrayal of Black Americans with Disabilities: Stepping Stones or Stumbling Blocks" and the above discussion must suggest that negative depictions or no depictions of the issue are necessarily stumbling blocks. But this is not always true. Activists and disability groups have a baseline from which to operate in their efforts to change public opinion and attitudes. As with the Civil Rights Movement, the disability issue has to be addressed in its broad context, the rights of people with disabilities as citizens of the United States.

Some positive trends in the media are also being observed and effected. New characterizations are appearing on the screen, as a result of the increasing impact on casting and characterization of the Media Access Office of the California Foundation on Employment and Disability and other disability activist groups within the entertainment industry. The creation of these groups, in itself, reflects the emergence of the Disability Civil Rights Movement and the growing media awareness of the disability community. While the old stereotypes have persisted, some productions have responded to "a developing sociopolitical consciousness about disabled people" (Longmore, 1987). This is demonstrated in presentations of people with disabilities in motion pictures like The Other Side of the Mountain, parts one and two, and Coming Home. Both of these shows deal with living with paraplegia.

There is also a trend towards using actors with disabilities in endorsing products on television. Initially, it was thought, and rightly so, that industry would be accused of exploiting people with disabilities if they employed actors with disabilities. Yet, beginning in 1983, commercials using persons with disabilities began to appear on television. During the 1984 Summer Olympics, Levi Jeans presented provocative spots showing young adults including a young man in a sports wheelchair. A McDonald's commercial showed a couple of young deaf college students communicating in sign language. In 1985 commercials for Kodak and People Magazine included persons in wheelchairs as consumers and Plymouth Voyager featured a middle-aged man on crutches, endorsing the car.

These commercials are a major departure from the stereotypical images of people with disabilities. It is true that none of the characters in these commercials were Black. While this is discouraging, one needs to consider that twenty years ago there were no Blacks in television as positive role models, or ones portraying images of success either. With the advent of the shows such as The Cosby Show and 227, both depicting Blacks as successful, educated, professional and family-oriented, the portrayal of Blacks with disabling conditions should not be too far behind. Stevie Wonder and Ray Charles have been successful in spite of being Black and blind.

Interface (1985) reported that The Academy Players Directory, the casting "Bible" of The Academy of Motion Picture Arts and Sciences will include actors with disabilities. Only by looking under a listing of performers with disabilities will a casting director know that the person whose faceshot he chose has a disability. Leadership in the Black community and Black performers with disabilities can certainly be registered in this directory, and get involved in projecting real life images of people with disabilities in their community.

They should also assume advocacy roles in promoting Black Americans with disabilities in the media.

The Writer's Guild has set up a committee of screen writers concerned about the image of people with disabilities. The committee routinely checks with The California Media Office on Disability to review scripts that deal with disability issues. The goal of this committee is to project disability as a fact of life. Black persons with disabilities and those advocating for them need to provide input into the scripts and screen plays being considered for production.

There are established guidelines which were developed by the President's Committee on the Employment of the Handicapped regarding realistic portrayal of persons with disabilities. Black individuals with disabilities also should be portrayed as members of their own communities as well as multifaceted persons of the larger American society. Only when the media begins to present Black Americans with disabilities in these terms can the viewing public see the different dimensions of the persons as individual members of their group and society.

Thus, positive trends and advancements in the media's portrayal of people with disabilities in general are steps in the right direction. Hopefully, Black Americans with disabilities can also join the ranks and reflect the changes occuring in the world around them.

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MEDIA PORTRAYAL OF AMERICANS WITH DISABILITIES: STEPPING STONES OR STUMBLING BLOCKS

SESSION F: SUMMARY

Recorder: Robert H. Ruffner
Director of Public Affairs
President's Committee on Employment of
People with Disabilities

The media's portrayal of Americans with disabilities is very mixed. While disability issues (transportation, jobs, housing, poverty) are increasingly attracting serious media attention, the "image" of people with disabilities in fundraising efforts and in entertainment programming (sitcoms, films, "style" sections of newspapers) lags behind and presents a picture of dependent, pitiful, helpless, sick people.

Far too frequently, disability remains "segregated" and "special" in the media in both the news and entertainment areas. In society, too, people with disabilities are too frequently "invisible" and not part of community life and activities. Studies indicate that people with disabilities get their information, as well as their imagery, from the media that pervade our country. The amount of information that people with disabilities need is staggering: only 31% of Americans with disabilities surveyed by Louis Harris and Associates in the landmark study "Disabled Americans' Self-Perceptions," 1986, were aware of Section 504 of the 1973 Rehabilitation Act, the cornerstone of civil rights for people with disabilities.

"Disabled Americans' Self Perceptions" also identified the fact that only 13% of America's citizens with disabilities have benefitted from either rehabilitation or accessible transportation - two of the best funded and advertised programs available to them.

These statistics indicate the real need for information among people with disabilities. Compounding the paucity of information available through commercial radio, television, magazines and newspapers, is the difficulty of reaching the "typical" Black American with a disability. The 1980 Census Study found this "typical" person to be: urban, female, and poor.

Reaching the population of persons with disabilities with the information they need is a challenge to all who are working in the disability field, professional and consumer, and all who are interested in the rights of people with disabilities. The few available studies on sources of information for people with disabilities generally indicate typical sources: television, radio and newspapers. THE DISABILITY RAG, a publication produced in Louisville, KY (that has the distinction of being the only disability publication to attract a front-page news story in THE WALL STREET JOURNAL) is currently surveying its readers with disabilities to pinpoint their sources of information and to determine which are the most valuable in conveying information about disability. This will be a most important study for the disability field in determining future information directions.

Studies also indicate that poor people get their information in a wide variety of ways, distinct from the typical middleclass media outlets. Since the majority of Americans with disabilities are typically poor with low educational levels, reaching them with the information they need to lead fuller and more independent lives is a challenge. Some of the ways that poor people get information in which they have confidence include: doctors, teachers, religious figures, and leaders within their own particular community. While no recent studies have been done, doctors were found a number of years ago to be woefully ignorant of services available to people with disabilities. Doctors appear to think of people with disabilities only in health terms; and when they can do nothing further to alleviate the "sickness," they tend to move on to other patients and other health problems. Hospitals, other than those specializing in rehabilitation, also could be outstanding sources of information.

Teachers and religious leaders could help to set up discussion groups among people with disabilites to share knowledge about services and programs. Parent groups, usually concerned with one specific disability, have proven their value as information exchanges. Parent groups have not met the success among Black Americans that they have among White. There is an opportunity here.

In fact, there are opportunities throughout society to improve information about disability and to insure that the people who need it will get it. There are informal means: church newsletters, posters, community center events, open houses at facilities, leaflets in doctors offices, clinics, schools and churches. There are the specialized media such as community newsletters, Black newspapers and magazines, Black radio programs and TV shows.

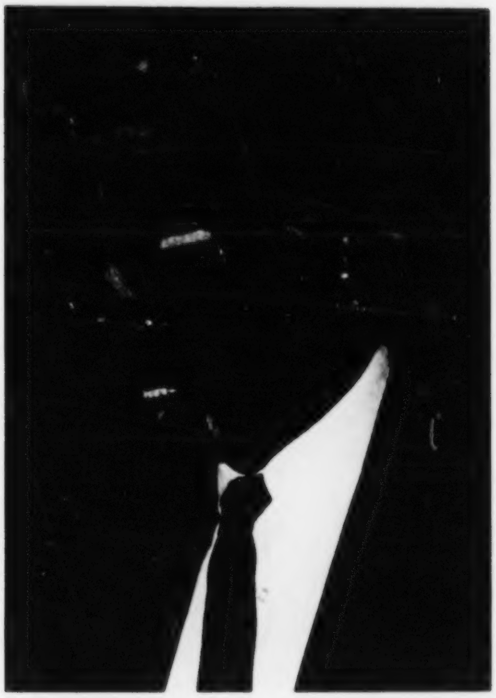
Certainly, Black Americans with disabilities have outstanding role models: Stevie Wonder, Ray Charles, George Shearing, a host of other prominent people. Here, too, is an opportunity to involve role models in focusing specifically on the programs and services available to assist Black Americans with disabilities to lead full and independent lives.

Those of us concerned with disability can change the status quo by building relationships with the media and by providing the media the information and story ideas that reporters, editors and broadcasters can turn into news stories. It's up to us to follow the media, to congratulate whenever possible, to remind constantly, to provide the facts and leads that will lift disability out of invisibility. We cannot afford to shrug off this responsibility to build broad media recognition of the significance of disability as a social, economic and political issue.

BUILDING BRIDGES TO
INDEPENDENCE

EMPLOYMENT SUCCESSES, PROBLEMS, & NEEDS
OF BLACK AMERICANS WITH DISABILITIES

PHOTOGRAPHIC HIGHLIGHTS OF
THE NATIONAL CONFERENCE



Clarence Thomas

Justin Dart

Lex Frieden and Ethel Briggs

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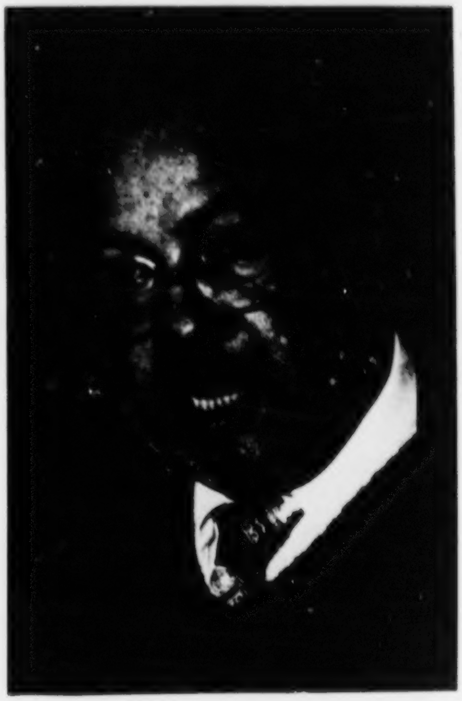
Jean K. Elder



Milton E. Wilson, Jr.

Isaac W. Hopkins (R) and Milton Wilson

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Martha Lentz Walker

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Sushila Kapur

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Elizabeth H. Anderson

Robert H. Ruffner

Jesse W. Fowler

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David Gray, former director of NIDRR

Harold Russell

Elaine Williams (L) and interpreter

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L. Deno Reed
of NIDRR

George Covington

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